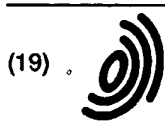


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European Patent Office
Office européen des brevets



(11) **EP 0 548 448 B1**

(12) **EUROPEAN PATENT SPECIFICATION**

(45) Date of publication and mention
of the grant of the patent:
06.09.2000 Bulletin 2000/36

(51) Int. Cl.⁷: **A61K 9/50, A61K 9/54**

(21) Application number: **92106519.9**

(22) Date of filing: **15.04.1992**

(54) **Stabilized controlled release substrate having a coating derived from an aqueous dispersion of hydrophobic polymer**

Stabilisiertes Substrat für kontrollierte Freigabe mit von einer wässrigen Dispersion eines hydrophobischen Polymers abgeleitete Beschichtung

Substrat stabilisé à libération contrôlée ayant une couche dérivée d'une dispersion aqueuse de polymère hydrophobe

(84) Designated Contracting States:
AT BE CH DE DK ES FR GB GR IT LI LU NL PT SE

(30) Priority: **24.12.1991 US 814111**

(43) Date of publication of application:
30.06.1993 Bulletin 1993/26

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• **D. L. MUNDAY, A. R. FASSIHI '5th Congr. Int. technol. pharm. volume 2, changes in drug release rate, effect of temperature and relative humidity on polymeric film coatings' 1989, ASSOC. PHARM. GALENIQUE IND., CHATENAY MALABRY, FR**

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Description

[0001] It is the aim of all controlled release preparations to provide a longer duration of pharmacological response after the administration of the dosage form than is ordinarily experienced after the administration of an immediate release dosage form. Such extended periods of response provides for many inherent therapeutic benefits that are not achieved with short acting, immediate release products.

[0002] Controlled release formulations known in the art include specially coated beads or pellets, coated tablets and ion exchange resins, wherein the slow release of the active drug is brought about through selective breakdown of, or permeation through, the coating of the preparation or through formulation with a special matrix to affect the release of the drug.

[0003] An important aspect of all forms of controlled release dosage forms is related to the stability of the same. The stability of a pharmaceutical dosage form is related to maintaining its physical, chemical, microbiological, therapeutic, pharmaceutical, and toxicological properties when stored, i.e., in a particular container and environment. Stability study requirements are covered, e.g., in the Good Manufacturing Practices (GMPs), the U.S.P., as well as in New Drug Applications (NDAs) and Investigational New Drug Applications (INDs).

[0004] The ingredients used in sustained release dosage formulations often present special problems with regard to their physical stability during storage. For example, waxes which have been used in such formulations are known to undergo physical alterations on prolonged standing, thus precautions are taken to stabilize them at the time of manufacture or to prevent the change from occurring. Fats and waxy materials when used in purified states are known to crystallize in unstable forms, causing unpredictable variations in availability rates during stability testing at the time of manufacture and during later storage.

[0005] It is known that certain strategies can be undertaken to obtain stabilized controlled release formulations in many cases, such as insuring that the individual ingredients are in a stable form before they are incorporated into the product, and that processing does not change this condition, retarding the instability by including additional additives, and inducing the individual ingredients of the dosage form to reach a stable state before the product is finally completed.

[0006] It is also recognized that the moisture content of the product can also influence the stability of the product. Changes in the porosity and/or hydration level of a polymeric film, such as the ethyl celluloses, can alter the rate of water permeation and drug availability. Also, binders such as acacia are known to become less soluble when exposed to moisture and heat. Such problems have been handled by controls in the processing method and proper packaging of the product.

[0007] Hydrophobic polymers such as certain cellulose derivatives, zein, acrylic resins, waxes, higher aliphatic alcohols, and polylactic and polyglycolic acids have been used in the prior art to develop controlled release dosage forms. Methods of using these polymers to develop controlled release dosage forms such as tablets, capsules, suppositories, spheroids, beads or microspheres are to overcoat the individual dosage units with these hydrophobic polymers. It is known in the prior art that these hydrophobic coatings can be applied either from a solution, suspension or dry. Since most of these polymers have a low solubility in water, they are usually applied by dissolving the polymer in an organic solvent and spraying the solution onto the individual drug forms (such as beads or tablets) and evaporating off the solvent.

[0008] Aqueous dispersions of hydrophobic polymers have been used in the prior art to coat pharmaceutical dosage forms for aesthetic reasons such as film coating tablets or beads or for taste-masking. However, these dosage forms are used for immediate release administration of the active drug contained in the dosage form.

[0009] The use of organic solvents in the preparation of polymer coatings is considered problematic as the formulations have inherent problems with regard to flammability, carcinogenicity, and safety in general. In addition, the use of organic solvents is disfavored due to environmental concerns.

[0010] Therefore, it is desirable to prepare a controlled release formulation prepared from an aqueous dispersion of a hydrophobic polymer. However, to date, attempts to prepare stable controlled release pharmaceutical formulations using aqueous dispersions of hydrophobic polymers have been unsuccessful due to stability problems. In particular, when coating these pharmaceutical forms using aqueous polymeric dispersions to obtain a desired release profile of the active drug(s) over several hours or longer, it is known in the art that the dissolution release profile changes on ageing. It is also known that this instability problem does not exist when the polymers are applied from organic solvent solution.

[0011] For example, Dressman, et al., *Proceed. Intern. Symp. Control. Rel. Bioact. Mater.*, 18 (1991), pp. 654-655, Controlled Release Society, Inc. reported on tests conducted which showed that phenylpropanolamine HC1 pellets coated with an ethyl cellulose-based film are only stable at room temperature under ambient humidity conditions. In these experiments, phenylpropanolamine HC1 was overlaid on sugar seeds to a 76% loading, and coated with 10% ethyl cellulose applied from an aqueous dispersion. A second sample consisted of phenylpropanolamine spheronized with microcrystalline cellulose in a 70:30 ratio, then coated with 15% ethyl cellulose applied from an aqueous dispersion. Samples from each batch were stored for up to four weeks under conditions of room temperature/ambient humid-

ity; room temperature/high humidity (75% RH); 37°C/ambient humidity; and 37°C/high humidity. The data for the dissolution profiles indicated that the lag time and percent drug released at 8 hours were unstable at all conditions other than room temperature/ambient humidity conditions.

[0012] Although the authors considered the pellets to be unaffected by storage conditions, they concluded that the release mechanism from the phenylpropanolamine HC1 pellets overcoated with ethyl cellulose-based films appear to depend upon the pellet composition, and that under high relative humidity storage, the rate of release may be effected, especially if the samples were stored at elevated temperature.

[0013] Munday, et al., Drug Devel. and Indus. Phar., 17 (15) 2135-2143 (1991) report that film coated theophylline mini-tablets film coated with ethyl cellulose with PEG (2:1), and ethyl cellulose with Eudragit L (2:1) proved to have impeded dissolution upon storage under stress conditions, the degree of slowdown of release being said to be directly proportional to temperature, while the effect of relative humidity (RH) appeared to be insignificant.

[0014] The authors concluded therein that the decreased rate of release was due to the slowing in the rate of molecular diffusion of the drug across the polymeric coating material, and suggested that the change was due to significant alterations in the permeability of the polymer which occurred during the experimental storage.

[0015] Aqueous polymeric dispersions have been used to produce stable controlled release dosage forms, but this has only been possible by other methods such as incorporation of the same into the matrix of the dosage form, rather than via the use of a coating of the aqueous polymeric dispersion to obtain retardant properties.

OBJECTS AND SUMMARY OF THE INVENTION

[0016] It is therefore an object of the present invention to provide a controlled release dosage form for oral administration which comprises a coating of an aqueous dispersion of a hydrophobic polymer which is substantially stable despite exposure to elevated temperatures and/or elevated humidity levels during storage.

[0017] It is a further object of the present invention to provide a controlled release dosage form prepared with an overcoat of an aqueous dispersion of a hydrophobic polymer which is substantially stable under stress conditions, including even extended periods of high temperature and high humidity.

[0018] These objects and others have been accomplished by the present invention, which relates to a solid dosage form which has a controlled release overcoat derived from an aqueous dispersion of a hydrophobic polymer which provides a substantially stable release pattern of a therapeutically active agent(s) contained therein.

[0019] The present invention further relates to the surprising discovery that when the coated formulation is exposed to certain elevated or „stressed“ conditions of temperature and humidity for a certain amount of time, a desired endpoint may be attained whereat the release rate of the therapeutically active agent does not substantially change upon ageing under a wide range of temperature and/or humidity conditions. This surprising discovery makes it possible to use aqueous dispersions of hydrophobic polymers for coating pharmaceutical dosage forms to produce stable controlled release pharmaceutical products.

[0020] The present invention is also related to a solid dosage form obtainable according to the method as described herein comprising a core comprising a therapeutically active agent and an overcoating derived from an aqueous dispersion of ethylcellulose in an amount sufficient to obtain a controlled release of the therapeutically active agent when the dosage form is exposed to aqueous solutions, e.g. gastric fluid. The solid dosage form is cured after the overcoating is applied such that the release of the therapeutically active agent is substantially unaffected by exposure to elevated temperature and/or humidity.

[0021] The present invention is also related to a stabilized controlled release solid dosage form obtainable according to the method as described herein for oral administration, comprising a plurality of inert pharmaceutically acceptable beads coated with a therapeutically active agent, and an ethylcellulose overcoat of a suitable thickness to obtain a controlled release of said therapeutically active agent when the solid dosage form is exposed to aqueous solutions, the ethylcellulose overcoat being derived from an aqueous dispersion of ethylcellulose with an effective amount of a suitable plasticizing agent. The ethylcellulose coated beads are cured under stress conditions, i.e. at a temperature greater than the glass transition temperature of the aqueous dispersion of ethylcellulose and relative humidity elevated to a suitable level above ambient conditions to attain a finished product which has a changed dissolution profile which is substantially unaffected by exposure to storage conditions of elevated temperature and/or humidity.

[0022] The present invention is further related to a stabilized solid controlled dosage form obtainable according to the method as described therein comprising a therapeutically active agent overcoated with an aqueous dispersion of ethylcellulose.

[0023] The present invention is also related to a method for obtaining a stabilized controlled release formulation comprising a substrate coated with an aqueous dispersion of a hydrophobic polymer, comprising preparing an aqueous dispersion of ethylcellulose, preparing a substrate comprising a therapeutically active agent, overcoating the substrate with a sufficient amount of the aqueous dispersion of ethylcellulose to obtain a predetermined controlled release of the therapeutically active agent when the coated particles are exposed to aqueous solutions, and curing the coated sub-

strate under stressed conditions by subjecting said coated particles to a temperature greater than the glass transition temperature of the aqueous dispersion of ethylcellulose and at a greater than ambient relative humidity and continuing the curing until an endpoint is reached at which the coated substrate attains a changed dissolution profile which is substantially unaffected by exposure to storage conditions of elevated temperature and/or humidity.

[0024] In a further embodiment, the method further includes the step of determining the endpoint for a particular formulation by exposing the formulation to various stages of the above-mentioned curing and obtaining dissolution profiles for the formulation until the dissolution profiles of the formulation are substantially stabilized. The formulation is then modified, if necessary, to obtain a desired dissolution profile of the therapeutically active agent based on the endpoint.

DETAILED DESCRIPTION

[0025] Ethylcellulose, which is a cellulose ether that is formed by the reaction of ethyl chloride with alkaline cellulose, is completely insoluble in water and gastrointestinal juices, and therefore to date has been considered not to be suitable by itself for tablet coating. It has, however, been commonly used in combination with hydroxypropyl methylcellulose and other film-formers to toughen or influence the dissolution rate of the film. Due to the solubility characteristics of ethylcellulose, this polymer has been mainly applied to the above-mentioned formulations from organic solutions.

Many polymers have been investigated for use in film-coating. Most film-coats are prepared by deposition of one or more film-forming polymers resulting in coats that usually represent no more than about 2-5% by weight of the final coated product. The film-coating has been used in conjunction with the preparation of tablets, pills, capsules, granules, and powders. The characteristics of the polymer used in the film-coating is governed by the structure, size and properties of its macromolecules. Common film-formers used in pharmaceuticals as nonenteric materials include hydroxypropyl methylcellulose, methyl hydroxyethylcellulose, hydroxypropylcellulose, sodium carboxymethylcellulose, ethylcellulose, and others.

[0026] In order to obtain a controlled release formulation, it is usually necessary to overcoat the substrate comprising the therapeutically active agent with a sufficient amount of the aqueous dispersion of ethylcellulose to obtain a weight gain level from about 5 to about 15 percent, although the overcoat may be lesser or greater depending upon the physical properties of the therapeutically active agent and the desired release rate, the inclusion of plasticizer in the aqueous dispersion of ethylcellulose and the manner of incorporation of the same, for example.

[0027] An example of a suitable controlled release formulation pursuant to the present invention will provide a dissolution rate in vitro of the dosage form, when measured by the USP Paddle Method at 100 rpm in 900 ml aqueous buffer (pH between 1.6 and 7.2) at 37° C, is between 12.5 and 42.5% (by wt) therapeutically active agent released after 1 hour, between 25 and 55% (by wt) released after 2 hours, between 45 and 75% (by wt) released after 4 hours and between 55 and 85% (by wt) released after 6 hours. This example is, of course, not intended to be limiting in any manner whatsoever.

[0028] The aqueous dispersions of hydrophobic polymers used as coatings in the present invention may be used in conjunction with tablets, spheroids (or beads), microspheres, seeds, pellets, ion-exchange resin beads, and other multi-particulate systems in order to obtain a desired controlled release of the therapeutically active agent. Granules, spheroids, or pellets, etc., prepared in accordance with the present invention can be presented in a capsule or in any other suitable dosage form.

[0029] Because ethylcellulose has a relatively high glass transition temperature and does not form flexible films under normal coating conditions, it is necessary to plasticize the ethylcellulose before using the same as a coating material.

[0030] One commercially-available aqueous dispersion of ethylcellulose is Aquacoat® (FMC Corp., Philadelphia, Pennsylvania, U.S.A.). Aquacoat® is prepared by dissolving the ethylcellulose in a water-immiscible organic solvent and then emulsifying the same in water in the presence of a surfactant and a stabilizer. After homogenization to generate submicron droplets, the organic solvent is evaporated under vacuum to form a pseudolatex. The plasticizer is not incorporated in the pseudolatex during the manufacturing phase. Thus, prior to using the same as a coating, it is necessary to intimately mix the Aquacoat® with a suitable plasticizer prior to use.

[0031] With respect to handling and storage conditions, FMC states that Aquacoat® will undergo a rise in viscosity upon prolonged exposure to temperatures below 15°C or above 35°C, and that viscosity can be reduced to less than 100 cps by applying shear (e.g., propeller type mixer). FMC further states that a continuous film may be formed through a process known as gradual coalescence wherein the individual latex particles coalesce to form a continuous film of plasticized ethylcellulose polymer. After this period, the properties are said to remain constant. Higher coating temperatures, or a high temperature "curing" step is said by FMC to accelerate the process. If the coalescence process is not complete, FMC states that variability in release rates will result.

[0032] However, as will be demonstrated by the examples provided therein, it has been found that curing the film coating simply by utilizing a higher coating temperature or a high temperature curing step will not effectively stabilize

the dissolution profile of the product upon storing.

[0033] Another aqueous dispersion of ethylcellulose is commercially available as Surelease® (Colorcon, Inc., West Point, Pennsylvania, U.S.A.). This product is prepared by incorporating plasticizer into the dispersion during the manufacturing process. A hot melt of a polymer, plasticizer (dibutyl sebacate), and stabilizer (oleic acid) is prepared as a homogeneous mixture, which is then diluted with an alkaline solution to obtain an aqueous dispersion which can be applied directly onto substrates.

[0034] The coating formulations of the present invention should be capable of producing a strong, continuous film that is smooth and elegant, capable of supporting pigments and other coating additives, non-toxic, inert, and tack-free.

[0035] It is preferred that the aqueous dispersion of ethylcellulose used in the present invention include an effective amount of a suitable plasticizing agent, as it has been found that the use of a plasticizer will further improve the physical properties of the film. The plasticization of the ethylcellulose may be accomplished either by so-called "internal plasticization" and "external plasticization."

[0036] Internal plasticization usually pertains directly to molecular modifications of the polymer during its manufacture, e.g., by copolymerization, such as altering and/or substituting functional groups, controlling the number of side chains, or controlling the length of the polymer. Such techniques are usually not performed by the formulator of the coating solution. External plasticization involves the addition of a material to a film solution so that the requisite changes in film properties of the dry film can be achieved.

[0037] The suitability of a plasticizer depends on its affinity or solvating power for the polymer and its effectiveness at interfering with polymer-polymer attachments. Such activity imparts the desired flexibility by relieving molecular rigidity. Generally, the amount of plasticizer included in a coating solution is based on the concentration of the film-former, e.g., most often from about 1 to about 50 percent by weight of the film-former. Concentration of the plasticizer, however, can only be properly determined after careful experimentation with the particular coating solution and method of application.

[0038] An important parameter in the determination of a suitable plasticizer for a polymer is related to the glass transition temperature (T_g) of the polymer. The glass transition temperature is related to the temperature or temperature range where there is a fundamental change in the physical properties of the polymer. This change does not reflect a change in state, but rather a change in the macromolecular mobility of the polymer.

[0039] Below the T_g, the polymer chain mobility is severely restricted. Thus, for a given polymer, if its T_g is above room temperature, the polymer will behave as a glass, being hard, non-pliable and rather brittle, properties which could be somewhat restrictive in film coating since the coated dosage form may be subjected to a certain amount of external stress.

[0040] Incorporation of suitable plasticizers into the polymer matrix effectively reduces the T_g, so that under ambient conditions the films are softer, more pliable and often stronger, and thus better able to resist mechanical stress.

[0041] Other aspects of suitable plasticizers include the ability of the plasticizer to act as a good "swelling agent" for the ethylcellulose, and the insolubility of the plasticizer in water.

[0042] Examples of suitable plasticizers include water insoluble plasticizers such as dibutyl sebacate, diethyl phthalate, triethyl citrate, tributyl citrate, and triacetin, although it is possible that other water-insoluble plasticizers (such as acetylated monoglycerides, phthalate esters, castor oil, etc.) may be used. Triethyl citrate is an especially preferred plasticizer for the aqueous dispersions of ethyl cellulose of the present invention.

[0043] The stabilized controlled release formulations of the present invention slowly release the therapeutically active agent, e.g., when ingested and exposed to gastric fluids, and then to intestinal fluids. The controlled release profile of the formulations of the invention can be altered, for example, by varying the amount of overcoating with the aqueous dispersion of ethylcellulose, altering the manner in which the plasticizer is added to the aqueous dispersion of ethylcellulose, by varying the amount of plasticizer relative to ethylcellulose, by the inclusion of additional ingredients or excipients, by altering the method of manufacture, etc.

[0044] A wide variety of therapeutically active agents can be used in conjunction with the present invention. The therapeutically active agents (e.g. pharmaceutical agents) which may be used in the compositions of the present invention include both water soluble and water insoluble drugs. Examples of such therapeutically active agents include anti-histamines (e.g., dimenhydrinate, diphenhydramine, chlorpheniramine and dexchlorpheniramine maleate), analgesics (e.g., aspirin, codeine, morphine, dihydromorphone, oxycodone, etc.), anti-inflammatory agents (e.g., naproxyn, diclofenac, indomethacin, ibuprofen, acetaminophen, aspirin, sulindac), gastro-intestinals and anti-emetics (e.g., metoclopramide), anti-epileptics (e.g., phenytoin, meprobamate and nitrazepam), vasodilators (e.g., nifedipine, papaverine, diltiazem and nicardipine), anti-tussive agents and expectorants (e.g., codeine phosphate), anti-asthmatics (e.g. theophylline), anti-spasmodics (e.g. atropine, scopolamine), hormones (e.g., insulin, leparin), diuretics (e.g., elfacrylic acid, bendrofluazide), anti-hypotensives (e.g., propranolol, clonidine), bronchodilators (e.g., albuterol), anti-inflammatory steroids (e.g., hydrocortisone, triamcinolone, prednisone), antibiotics (e.g., tetracycline), antihemorrhoidals, hypnotics, psychotropics, antidiarrheals, mucolytics, sedatives, decongestants, laxatives, antacids, vitamins, stimulants (including appetite suppressants such as phenylpropanolamine). The above list is not meant to be exclusive.

[0045] In certain preferred embodiments, the therapeutically active agent comprises hydromorphone, oxycodone, dihydrocodeine, codeine, dihydromorphine, morphine, buprenorphine, salts of any of the foregoing, and mixtures of any of the foregoing, and the like.

[0046] When the aqueous dispersion of ethylcellulose is used to coat inert pharmaceutical beads such as nu pariel 18/20 beads, a plurality of the resultant stabilized solid controlled release beads may thereafter be placed in a gelatin capsule in an amount sufficient to provide an effective controlled release dose when ingested and contacted by gastric fluid. In this embodiment, beads coated with a therapeutically active agent are prepared, e.g. by dissolving the therapeutically active agent in water and then spraying the solution onto a substrate, for example, nu pariel 18/20 beads, using a Wurster insert. Optionally, additional ingredients are also added prior to coating the beads in order to assist the hydromorphone binding to the beads, and/or to color the solution, etc. For example, a product which includes hydroxypropyl methylcellulose, etc. with or without colorant may be added to the solution and the solution mixed (e.g., for about 1 hour) prior to application of the same onto the beads. The resultant coated substrate, in this example beads, may then be optionally overcoated with a barrier agent, to separate the therapeutically active agent from the ethylcellulose coating. An example of a suitable barrier agent is one which comprises hydroxypropyl methylcellulose. However, any film-former known in the art may be used. It is preferred that the barrier agent does not affect the dissolution rate of the final product.

[0047] The hydromorphone, HPMC protected (optional) beads may then be overcoated with an aqueous dispersion of ethylcellulose. The aqueous dispersion of ethylcellulose preferably further includes an effective amount of plasticizer, e.g. triethyl citrate. Pre-formulated aqueous dispersions of ethylcellulose, such as Aquacoat® or Surelease®, may be used. If Surelease® is used, it is not necessary to separately add a plasticizer. The coating solutions of the present invention preferably contain, in addition to the film-former, plasticizer, and solvent system (i.e., water), a colorant to provide elegance and product distinction. Color may be added to the solution of the therapeutically active agent instead, or in addition to the aqueous dispersion of ethylcellulose. For example, color be added to Aquacoat® via the use of alcohol or propylene glycol based color dispersions, milled aluminum lakes and opacifiers such as titanium dioxide by adding color with shear to water soluble polymer solution and then using low shear to the plasticized Aquacoat®. Alternatively, any suitable method of providing color to the formulations of the present invention may be used.

[0048] The plasticized aqueous dispersion of ethylcellulose may be applied onto the substrate comprising the therapeutically active agent by spraying using any suitable spray equipment known in the art. A sufficient amount of the aqueous dispersion of ethylcellulose to obtain a predetermined controlled release of said therapeutically active agent when said coated substrate is exposed to aqueous solutions, e.g. gastric fluid, is preferably applied, taking into account the physical characteristics of the therapeutically active agent, the manner of incorporation of the plasticizer, etc. After coating with Aquacoat®, a further overcoat of a film-former, such as Opadry®, is optionally applied to the beads. This overcoat is provided, if at all, in order to substantially reduce agglomeration of the beads.

[0049] Next, the coated beads are cured in order to obtain a stabilized release rate of the therapeutically active agent. Curing is traditionally carried out, if at all, via a forced-air oven at 60°C for anywhere from 2-24 hours. This standard curing does not stabilize the dissolution profile of the formulation, as will be demonstrated by the examples set forth herein.

[0050] The curing step pursuant to the present invention is accomplished by subjecting the coated beads to "stressed conditions" by subjecting said coated substrate to a temperature greater than the glass transition temperature of the aqueous dispersion of ethylcellulose and at a greater than ambient relative humidity and continuing the curing until an endpoint is reached at which the coated beads attain a changed dissolution profile which is substantially unaffected by further exposure to storage conditions of elevated temperature and/or humidity.

[0051] One possible mechanism for the change in the dissolution profile of prior art products cured by the standard methods, i.e. curing for 2 hours or more at 60°C dry heat, is that these products continue to cure during storage, and may never reach a stabilized end-point at which the product provides a substantially constant dissolution profile. In contrast, the cured products of the present invention provide a release rate of the therapeutically active agent which is substantially unaffected during storage by elevations in temperature and humidity.

[0052] In preferred embodiments of the present invention, the stabilized product is obtained by subjecting the coated substrate to oven curing at elevated temperature/humidity levels for the required time period, the optimum values for temperature, humidity and time for the particular formulation being determined experimentally.

[0053] In certain embodiments of the present invention, the stabilized product is obtained via an oven curing conducted at a temperature of about 60°C and a relative humidity from about 60% to about 100% for a time period from about 48 to about 72 hours. This is the case for the hydromorphone beads described in the examples provided below. However, one skilled in the art will recognize that necessary curing conditions may be changed somewhat, and may in fact be broader than the above-mentioned temperature, humidity and time ranges, depending upon the particular formulation, in order to obtain a stabilized product.

[0054] When the controlled release coating of the present invention is to be applied to tablets, the tablet core (e.g. the substrate) may comprise the active agent along with any pharmaceutically accepted inert pharmaceutical filler (dilu-

ent) material, including but not limited to sucrose, dextrose, lactose, microcrystalline cellulose, xylitol, fructose, sorbitol, mixtures thereof and the like. Also, an effective amount of any generally accepted pharmaceutical lubricant, including the calcium or magnesium soaps may be added to the above-mentioned ingredients of the excipient prior to compression of the tablet core ingredients. Most preferred is magnesium stearate in an amount of about 0.5-3% by weight of the solid dosage form. Tablets overcoated with a sufficient amount of aqueous dispersions of ethylcellulose to achieve a controlled release formulation pursuant to the present may be prepared and cured in similar fashion as explained above with regard to the preparation of beads. One skilled in the art will recognize that necessary curing conditions with regard to the particular elevated temperature, elevated humidity and time ranges necessary to obtain a stabilized product, will depend upon the particular formulation.

DETAILED DESCRIPTION OF THE PREFERRED EMBODIMENTS

[0055] The following examples illustrate various aspects of the present invention. They are not to be construed to limit the claims in any manner whatsoever.

EXAMPLE 1

[0056] Hydromorphone beads were prepared by dissolving hydromorphone HC1 in water, adding Opadry® Y-5-1442, light pink (a product commercially available from Coloron, West Point, Pennsylvania, which contains hydroxypropyl methylcellulose, hydroxypropyl cellulose, titanium dioxide, polyethylene glycol and D&C Red No. 30 Aluminum Lake), 20% w/w, and mixing for about 1 hour, and then spraying onto nu pariel 18/20 beads using a Wurster insert. The resultant coated beads were then overcoated with Opadry® Y-5-1442 light pink (15% w/w). The resultant preparation had the formula set forth in Table 1 below:

TABLE 1

Ingredient	Percent	Amt/Unit
Hydromorphone HC1	4.75%	4 mg
Nu Pariel 18/20	87.9%	74 mg
Opadry® Lt. Pink Y-5-1442	2.4%	2 mg
Opadry® "(overcoat)	5.0%	4.2mq
	100.0%	84.2mg

[0057] The hydromorphone, HPMC protected beads were then overcoated with 15% w/w Aquacoat® (including triethyl citrate), and then overcoated with Opadry® Light Pink 5% w/w after curing (see Table 2). The beads cured at high humidity were dried in a fluid bed before the final overcoat.

TABLE 2

Composition After Coating	
Ingredient	Percent
Hydromorphone beads	80.57%
Aquacoat® ECD 30	12.06%
Triethyl citrate	2.39%
Opadry® Lt. Pink	4.98%
Y-5-1442 (Overcoat)	100.0%

[0058] The product was then divided into four portions. In Example 1, the coated beads were placed in a 30 cc amber glass vial and cured in an oven for 72 hours at 60.C/85% relative humidity. In Comparative Example 1A, the coated beads were cured for 24 hours at 60°C under dry conditions. In Comparative Example 1B, the coated beads were cured for 72 hours at 60.C under dry conditions. In Comparative Example 1C, the coated beads were cured for 24

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hours at 60°C at 85% relative humidity.

[0059] All products cured at the four above-mentioned different conditions were then tested for stability under the following conditions: Room Temperature; 37°C dry; 37°C/80% Relative Humidity (RH); 50°C dry; 60°C dry; and 60°C/85% RH.

[0060] The relative humidity in a water-filled desiccator in a 60°C oven was determined as follows. First, about 500 grams of purified water is poured into a plastic desiccator and the metal guard inserted. A hygrometer/temperature indicator is placed on top of the guard and the desiccator covered and placed in the oven for 24 hours. After 24 hours the relative humidity in the desiccator was 85% while the temperature was still 60°C. On placing the hygrometer alone in the 60°C oven for 24 hours, the relative humidity was 9% at 60°C.

[0061] The dissolution tests were carried out via the USP Basket Method, 37°C, 100 RPM, first hour 700 ml gastric fluid at pH 1.2, then changed to 900 ml at 7.5. In each instance, the dissolution was conducted by placing an open capsule containing the specified amount of cured beads (8mg hydromorphone HCl, 209mg beads \pm 10%) into a vessel.

[0062] It was observed that the dissolution of Example 1 did not change under these accelerated conditions, except that changes were seen with respect to the extreme conditions of 60°C/85% RH. The results for Example 1 are set forth in Tables 3-8 below.:

TABLE 3

ROOM TEMPERATURE								
Time(wks)	Hydromorphone HCl (Amount)	Dissolution						
		1	2	3	8	12	18	24
Initial	8.14 mg	0	4.6	29.5	52.6	64.7	76.6	82.8
1	7.95mg	0	5.1	30.3	55.0	67.4	79.8	88.9
4	7.80 mg	1.3	8.2	33.5	57.4	70.0	82.8	90.9
8	7.78 mg	0.7	6.0	30.5	54.0	66.4	78.0	88.2

TABLE 4

37°C DRY								
Time(wks)	Hydromorphone HCl (Amount)	Dissolution						
		1	2	3	8	12	18	24
Initial	8.14 mg	0	4.6	29.5	52.6	64.7	76.6	82.8
1	7.96 mg	0	6.0	30.8	55.3	68.0	81.6	89.7
4	7.91 mg	2	8.1	33.2	56.6	70.2	82.0	91.3
8	7.73 mg	1	5.8	31.3	57.5	64.6	82.7	91.6

TABLE 5

37°C/80%RH								
Time(wks)	Hydromorphone HC1 (Amount)	Dissolution						
		1	2	3	8	12	18	24
Initial	8.19 mg	0	4.6	29.5	52.6	64.7	76.6	82.8
1	7.85 mg	0	5.6	31.0	55.1	68.5	80.3	89.1
4	8.16 mg	2.4	7.6	32.3	52.8	64.4	75.4	82.7
8	8.22 mg	2.9	7.9	33.5	53.3	64.5	73.6	81.3

TABLE 6

50°C (dry)								
Time(wks)	Hydromorphone HC1 (Amount)	Dissolution						
		1	2	3	8	12	18	24
Initial	8.14 mg	0	4.6	29.5	52.6	64.7	76.6	82.8
1	8.14 mg	0	6.3	32.7	56.3	68.3	80.8	89
4	7.81 mg	2.3	10	37.0	59.6	72.0	84.5	92
8	7.74 mg	2	10.4	35.8	59.2	71.3	82.3	90.5

TABLE 7

60°C (dry)								
Time(wks)	Hydromorphone HC1 (Amount)	Dissolution						
		1	2	3	8	12	18	24
Initial	8.14 mg	0	4.6	29.5	52.6	64.7	76.6	82.8
1	8.13 mg	0	6.7	34.6	57.8	70.3	82.1	90.5
4	8.30 mg	2.7	10.6	36.6	56.8	68.7	80.4	85.6
8	7.94 mg	3.6	11.9	37.4	58.4	71.1	80.6	89.3

TABLE 8

60°C/100% RH								
Time(wks)	Hydromorphone HC1 (Amount)	Dissolution						
		1	2	3	8	12	18	24
Initial	8.14 mg	0	4.6	29.5	52.6	64.7	76.6	82.8
1	7.26 mg	6.1	9.9	23.4	42.4	53.3	63.1	72.5
4	6.64 mg	19	23.7	32.5	41.4	46.7	53.0	51.7
8	5.38 mg	25.1	28.4	33.2	40.0	44.1	47.7	52.

[0063] In contrast, the dissolution profiles of Comparative Examples 1A, 1B and 1C continued to slow down (e.g., cure) at all accelerated conditions. The results are set forth in Tables 9, 10 and 11, respectively.

TABLE 9

Comparative Example 1A								
Conditions/Time	Hydromorphone HC1 (Amount)	Dissolution						
		1	2	3	8	12	18	24
Initial	9.03 mg	17.8	43.6	63.6	78.8	86.7	94.7	94.2
Room Temp.								
8 wks	8.79 mg	18.4	35.9	58.2	76.3	88.7	97	*
37°C (dry)								
8 wks	8.50 mg	14.3	6.5	59.1	81.1	91.4	99.4	*
37°C/80%RH								
8 wks	8.15 mg	6.6	23.6	41.2	60.7	72.3	83.1	*
50°C(dry)								
8 wks	8.45 mg	17.3	36	56.1	78.1	89.1	97.1	102.6
60°C (dry)								
8 wks	8.65 mg	7.3	28.5	48.9	64.4	82	92.3	99.1
60°C/100%RH								
8 wks	5.81 mg	17.5	22.6	28.8	36.5	41.7	46.5	50.3

TABLE 10

Comparative Example 1B								
Conditions/Time	Hydromorphone HC1 (Amount)	Dissolution						
		1	2	3	8	12	18	24
Initial	8.82 mg	4.7	35.5	58.3	75.6	87.3	96.0	8.2
Room Temp.								
8 wks	8.29 mg	8.7	34.6	59.3	80.8	92.1	99.2	105.7
37°C (dry)								
8 wks	8.34 mg	8.3	36.1	55.9	77.4	87.3	97.8	103.1
37°C/80%RH								
8 wks	8.86 mg	4.9	25.4	43.6	61.7	70	80	87.2
50°C (dry)								
8 wks	8.71 mg	10.8	35.4	55.9	77.2	88.9	99.5	103.2
60°C (dry)								
8 wks	8.30 mg	5.3	32	54.1	76.6	87.2	99.8	105.5
60°C/100%RH								
8 wks	6.22 mg	16.3	21.2	27.4	35.9	40.5	46.2	49.4

TABLE 11

Comparative Example 1C								
Conditions/Time	Hydromorphone HC1 (Amount)	Dissolution						
		1	2	3	8	12	18	24
Initial	8.71 mg	0.7	15.3	41.9	60.7	71.2	82.4	86.7
Room Temp.								
8 wks	8.40 mg	1	14.2	39.8	58.8	69.1	79.1	87.2
37°C (dry)								
8 wks	8.84 mg	2.7	14.5	40.5	60.4	71	81.3	89.8
37°C/80%RH								
8 wks	8.78 mg	2.5	12.4	37.8	54.6	63.8	73.3	*
50°C (dry)								
8 wks	8.71 mg	3.2	17.5	42.3	61.1	70.8	81	87.9
60°C (dry)								
8 wks	8.57 mg	2.9	18.2	43.4	62.5	73.6	84.3	*
60°C/100%RH								
8 wks	6.10 mg	15.7	20.3	26.4	33.8	38.3	43.1	46.7

Figure 1 is a graphical representation of the dissolution results obtained with Example 1, comparing the initial dissolution profile with the dissolution profile after 8 weeks storage at 37°C/80%RH.

Figure 2 is a graphical representation of the dissolution profile of Comparative Example 1A, comparing the initial dissolution profile with the dissolution profile after 8 weeks storage at 37°C/80%RH.

Figure 3 is a graphical representation of the dissolution profile of Comparative Example 1B, comparing the initial dissolution profile with the dissolution profile after 8 weeks storage at 37°C/80%RH.

Figure 4 is a graphical representation of the dissolution profile of Comparative Example 1C, comparing the initial dissolution profile with the dissolution profile after 8 weeks storage at 37°C/80%RH.

Comparing the results depicted in Figure 1 (Example 1) with the results depicted in Figures 2-4 (the comparative examples), it is readily apparent that only in Example 1 were the initial and 8 week dissolution profiles substantially identical under storage conditions of 37°C/80%RH.

Figure 5 is a graphical representation of the dissolution profiles of Example 1, comparing the initial dissolution profile with the dissolution profiles obtained after 8 weeks storage under various conditions (room temperature; 37°C/80%RH; and 60°C dry). The dissolution profiles of Example 1 after 8 weeks under these various conditions is seen to be substantially identical.

Finally, Figure 6 is a graphical representation of the initial dissolution profiles obtained after various curing conditions (curing of 2hrs at 60°C dry (the prior art); 72hrs at 60°C/85%RH (Comparative Example 1); 24hrs at 60°C/85%RH (Comparative Example 1A); 24hrs at 60°C dry (Comparative Example 1B); and 72hrs at 60°C dry (Comparative Example 1C)).

EXAMPLE 2- Curing at 60°C Dry Heat - Longer Drying

[0064] In Example 2, hydromorphone HCl beads were prepared in accordance with Example 1 in order to determine if the stabilized initial dissolution achieved after curing at 60°C/85%RH could instead be achieved by a longer drying period without humidity. After coating with Aquacoat®, a further overcoat of Opadry® Y-5-1442, light pink is applied to the beads. The coated product had the composition set forth in Table 12 below:

TABLE 12

Composition After Coating		
Ingredient	Percent	Amt/Unit
Hydromorphone beads	80.57%	84.2mg
Aquacoat® ECD 30	12.06%	12.6mg
Triethyl citrate	2.39%	2.5mg
Opadry® Lt. Pink (Overcoat)	4.98%	5.2mg
	100.0%	99.3mg

[0065] The Aquacoat® coated hydromorphone HCl beads were then cured in a 60°C dry oven, and stored at 60°C dry heat. The cured beads were placed in open gelatin capsules containing the specified amount of cured beads (about 8mg hydromorphone HCl), and dissolution studies were then conducted in the manner set forth in Example 1 on three samples at the following time points: initial, 1 day, 2 days, 7 days, and 21 days in order to determine the stability of the dissolution profile. Dissolution studies were conducted as detailed above on the three samples. The mean results are set forth in Table 13 below:

TABLE 13

Dissolution (Time)								
Time (Days)	Wt (mg)	1 hr	2 hr	4 hr	8 hr	12 hrs	18 hrs	24 hrs
Initial	196.7	15.6	43.8	68.7	89.9	101.0	109.2	113.8
1	196.3	3.7	37.5	63.5	84.9	97.5	107.2	112.3
2	196.3	4.8	37.0	62.9	84.8	95.1	104.7	111.8
7	197.3	13.5	37.8	63.3	84.9	98.8	108.6	115.9
21	197.3	17.4	36.5	58.4	77.9	88.9	98.2	103.1

[0066] From the results set forth in Table 13 above, it is apparent that a profound slow down in release rate of the samples of Example 2 occurred, as compared with the high temperature/high humidity condition of Example 1. In other words, an endpoint was not reached at which the dissolution profile gets down to the base level of Example 1.

Example 3 - Increased Mixing Time

[0067] In Example 3, another attempt to stabilize Aquacoat® coated hydromorphone HC1 beads using the premise that high temperature is not enough to insure complete coalescence of the ethylcellulose film. Normal time of mixing (and bonding) plasticizer and Aquacoat® is recommended by FMC to be 30 minutes. In Example 3, the contact time of the plasticizer (triethyl citrate) with the ethylcellulose polymer dispersion (Aquacoat®) was increased to 24 hours.

[0068] The coated beads were prepared in accordance with Example 1 and then placed in a 30 cc amber glass vial and cured in a 60°C dry oven. Dissolution studies were then conducted on three samples at the following time points: 1 day, 2 days, 7 days and 11 days. Mean results are set forth in Table 14 below:

TABLE 14

Dissolution (Time)								
Time (Days)	Wt (mg)	1 hr	2 hr	4 hr	8 hr	12 hrs	18 hrs	24 hrs
1	210.7	27.7	53.3	77.3	95.7	103.4	108.2	110.4
2	209.7	25.9	50.3	74.3	94.2	101.9	106.4	110.2
7	209.7	24.8	48.3	73.1	95.2	102.7	108.5	112.6
11	210.3	24.0	45.4	70.5	94.9	103.9	113.3	115.9

[0069] From the results set forth in Table 14 above, it is apparent that a profound slow down in release rate of the samples of Example 2 occurred, as compared with the high temperature/high humidity condition of Example 1. In other words, an endpoint was not reached at which the dissolution profile gets down to the base level of Example 1.

EXAMPLE 4- Recommended Curing (Prior Art)

[0070] Hydromorphone beads were prepared by dissolving hydromorphone HC1 in water, adding Opadry®, and mixing for about 1 hour, and then spraying onto nu pariel 18/20 beads using a Wurster insert. The resultant coated beads were then overcoated with Opadry® Y-5-1442 light pink (15% w/w). The beads were then overcoated with a aqueous dispersion of Aquacoat® to a 15% weight gain according to Table 15 below:

TABLE 15

Ingredient	Percent (wt)	Amt/Unit
Hydromorphone beads	84.7	80 mg

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TABLE 15 (continued)

Ingredient	Percent (wt)	Amt/Unit
Aquacoat [®] CD 30	12.7	12 mg
Citroflex [®] 2A (Triethylcitrate)	2.5	2.4 mg
	99.9	94.4 mg

[0071] After the resin was applied to the beads, the beads were cured in a fluid bed for about 2 hours at 60 °C, as suggested in the literature and as recommended by FMC, since it is above the Tg for Aquacoat[®] plasticized with triethyl citrate at 20% level of solids.

[0072] The cured beads were then stored at room temperature, with dissolution studies being conducted initially and at 3 months. Samples were also stored at 37°C/80% RH. The mean results are provided in Table 16:

TABLE 16

Time	Mean wt	1 hr	2 hr	4 hr	8 hr	12 hrs	18 hrs	24 hrs
Initial	283.2	30.4	44	70.2	89.1	97.0	101.3	102.1
3 mos	282.3	36.2	57.8	76.9	89.0	93.4	96.6	98.5
37°C/80% RH								
1 mo	288.4	0.5	26.7	50.5	69.6	80.7	90.7	97.0
2 mos	287.3	0.6	25.1	50.7	70.3	81.6	92.2	98.8
3 mos	293.7	1.2	23.7	48.6	65.6	74.5	80.2	83.5

[0073] From the results provided in Table 16 above, it can be seen that the dissolution profile of the samples stored at room temperature were acceptable. However, the dissolution of the samples slowed dramatically when stored at 37°C/80% RH.

[0074] Samples from the batch of Example 4 were repackaged, stored and thereafter subjected to heat under dry conditions at 37°C and moisture (37°C/80% RH). The dissolution results are provided in Table 17 below:

TABLE 17

Time	Mean wt	1 hr	2 hr	4 hr	8 hr	12 hrs	18 hrs	24 hrs
Initial	283.2	30.4	49.0	70.3	89.1	97.0	101.3	102.1
37° Dry								
2 wks	283.2	25.0	44.4	65.0	84.5	92.9	100.7	104.4
4 wks	280.7	21.5	28.0	63.5	84.3	95.6	-	-
37°C/80% RH								
2 wks	283.2	16.6	39.1	60.5	80.1	89.8	99.8	103.4
4 wks	281.3	4.6	26.6	53.7	71.4	82.1	-	-

[0075] From the results set forth above, it is apparent that under dry conditions at 37°C, the dissolution of Example 4 did not come to the same endpoint as at 37°C/80% RH. Thus, the combination of both moisture and heat was required to complete the curing.

EXAMPLES 5-7

[0076] To test the effectiveness of high temperature (60°C), high humidity curing as an effective process of stabilizing plasticized ethylcellulose controlled release films, Examples 5-7 were manufactured at different levels of Aquacoat[®] load.

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[0077] In each of Examples 5-7, hydromorphone beads were made according to Example 1. Thereafter, overcoat-ings of 5% w/w, 10% w/w, and 15% w/w were applied to Examples 5-7 respectively, according to the formulas set forth in Tables 18-20:

TABLE 18

Composition of Ex. 5 After Coating		
Ingredient	Percent	Amt/Unit
Hydromorphone beads	84.2%	84.2mg
Aquacoat® ECD 30	4.7%	4.2mg
Triethyl citrate	0.9%	0.84mg
	<u>100%</u>	<u>89.24mg</u>

TABLE 19

Composition of Ex. 6 After Coating		
Ingredient	Percent	Amt/Unit
Hydromorphone beads	89.3%	84.2mg
Aquacoat® ECD 30	8.9%	8.4mg
Triethyl citrate	1.8%	1.7mg
	<u>100%</u>	<u>94.3mg</u>

TABLE 20

Composition of Ex. 7 After Coating		
Ingredient	Percent	Amt/Unit
Hydromorphone beads	84.8%	84.2mg
Aquacoat® ECD 30	12.7%	12.6mg
Triethyl citrate	0.9%	2.5mg
	<u>100%</u>	<u>99.3mg</u>

[0078] All three batches were cured in water loaded desiccators in a 60°C oven. These batches were placed on screen trays in these desiccators after the Aquacoat® film was applied to the HPMC overcoated hydromorphone HC1 bead. The desiccators containing the Aquacoat®-coated beads were then placed in a 60°C oven for 72 hours. Thereafter, the batches were removed from the ovens. The beads appeared moist and therefore were dried in a lab line fluid bed dryer for one hour. They were then overcoated with 5% w/w Opadry® Y-5-1442 light pink in a Wurster insert.

[0079] Stability studies on Examples 5-7 show the initial dissolutions to be the same as dissolutions done on sam-ples placed at 37°C/80% RH conditions. The results are provided in Tables 21-23 below:

TABLE 21

Dissolution (Time) - 5% Aquacoat®								
Time (Days)	Wt (mg)	1 hr	2 hr	4 hr	8 hr	12 hrs	18 hrs	24 hrs
Initial	190	39.8	57.4	73.0	88.0	93.8	98.0	95.6
28	191	33.4	54.6	71.9	84.2	89.8	94.6	96.4

TABLE 22

Dissolution (Time) - 10% Aquacoat®								
Time (Days)	Wt (mg)	1 hr	2 hr	4 hr	8 hr	12 hrs	18 hrs	24 hrs
Initial	200.3	7.5	27.9	48.5	68.1	76.2	90.3	88.9
28	210	9.9	32.4	52.6	67.8	77.9	85.9	90.9

TABLE 22

Dissolution (Time) - 15% Aquacoat®								
Time (Days)	Wt (mg)	1 hr	2 hr	4 hr	8 hr	12 hrs	18 hrs	24 hrs
Initial	210	5.4	13.9	38.0	57.8	68.4	78.6	81.3
28	207.3	9.5	23.8	43.4	58.8	67.8	77.0	81.3

EXAMPLE 8

[0080] In Example 8, Hydromorphone beads overcoated with 10% of the Aquacoat® are prepared in accordance with Example 6. The hydromorphone beads of Example 8 have the following formula set forth in Table 24 below:

TABLE 24

Ingredient	Percent	Amt/Unit
Hydromorphone beads	89.3%	84.2 mg
Aquacoat® ECD 30	8.9%	8.4 mg
Triethyl citrate	1.8%	1.7 mg
	100%	94.3 mg

[0081] To test the effectiveness of curing at a lower relative humidity compared to Example 6, the above beads were cured for 72 hours at 60°C at 60% relative humidity (rather than 85%RH). Similar initial results were obtained for Example 8 as compared to Example 6, thus indicating that the curing step can also be completed at a lower relative humidity. The results are set forth in Table 25 below:

TABLE 25

Dissolution (Time) - 10% Aquacoat®							
Example	1 hr	2 hr	4 hr	8 hr	12 hrs	18 hrs	24 hrs
Ex. 8	7.5	27.9	48.5	68.1	76.2	90.3	88.9
Ex. 6	1.1	18.9	45.0	65.0	76.0	85.8	91.5

EXAMPLES 9-10

[0082] Hydromorphone HCl beads were prepared made by spraying a suspension of Hydromorphone HCl and Opadry® Y-5-1442 light pink (20%w/w) onto nu-pariel 18/20 beads, in accordance with the method set forth in Example 1. These beads were then further coated with Opadry® Y-5-1442 light pink (15% w/w). These beads were then further coated with the Surelease® at a level of 10% weight gain. The formula of the coated bead is set forth in Table 26:

TABLE 26

Ingredient	mg/dose	Percent
Hydromorphone HCl	4.0 mg	4.32%
NuPariel beads 18/20	74.0 mg	79.91%
Opadry light pink	6.2 mg	6.70%
Surelease	8.4 mg	9.07%
	<u>92.6 mg</u>	<u>100%</u>

[0083] The batch was then divided into two portions. Example 9 was cured at 60°C/85% RH for 3 days (72 hours), and then dried in a fluid bed dryer for 30 minutes at 60°C to dry off the excess moisture. These beads were then over-coated with 5% Opadry light pink. Example 10 was left uncured.

[0084] Both Examples 9 and 10 were then filled into hard gelatin capsules at a strength of 4 mg hydromorphone per capsule and stored for 3 months at 37°C/80% RH. Dissolution studies were conducted (pursuant to the method set forth for Example 1) initially for both Examples 9 and 10 and again after the 3 month storage at 37°C/85% RH. The results are set forth in Tables 27 and 28 below:

TABLE 27

Example 9		
Time	Initial	3 Months at 37° C/80% RH
1	4.7	6.5
4	42.3	56.0
8	64.9	75.0
12	77.2	83.19

TABLE 28

Example 10		
Time	Initial	3 Months at 37° C/80% RH
1	1.6	4.5
4	12.0	61.9
8	47.8	79.0
12	66.7	87.7

[0085] The results indicate that despite the expected differences in initial release rates caused by the use of a different aqueous dispersion of ethylcellulose (Surelease® as compared to Aquacoat®), the curing step as described above for Example 9 still significantly stabilized the product in comparison to the uncured product of Example 10. The relatively faster controlled release rate of the Examples using Aquacoat® as compared to Surelease® may be due to the lesser degree of plasticization during the preparation of the coating formulation. However, products using either coating may be modified to obtain satisfactory results.

EXAMPLE 11

[0086] The following example illustrates the stabilization of morphine beads in accordance with the present invention.

[0087] A suspension of morphine sulphate and HPMC (Opadry® Clear Y-5-7095) was applied onto 18/20 mesh Nu-pariel beads in a fluid bed granulator with a Wurster column insert, at 60°C. A HPMC purple color suspension (Opadry® lavender YS-1-4729) was then applied as an overcoat at the same temperature. The beads were then overcoated to a 5% weight gain with Aquacoat® and triethyl citrate as a plasticizer at 60°C inlet. The beads were then cured in an oven at 60°C/100% relative humidity for three days. The beads were then dried in the fluid bed granulator at 60°C, and an overcoat of HPMC with a purple color was then applied using the Wurster column.

[0088] The beads were then filled into hard gelatin capsules at a strength of 30 mg morphine sulphate per capsule. The final formula, set forth in Table 29 thus became:

TABLE 29

Ingredient	mg/capsule	Percent
Morphine sulphate 5H ₂ O	30.0	8.51%
Nu-pariel beads 18/20	255.0	72.36%
Opadry® Clear Y-5-7095	15.0	4.26%
Opadry® Lavender YS-1-4729	15.8	4.48%
Aquacoat® ECD30 (solids)	15.8	4.48%
Triethyl citrate	3.2	0.91%
Opadry Lavender Y-S-1-4729	17.6	4.99%
	352.4	100%

[0089] An initial dissolution of the capsules was conducted using the USP paddle method at 100 rpm in 900 ml of water, and again after storage at 37°C/80% relative humidity, and at 60°C dry for one month. It was observed that a stable product was made. The results are set forth in Table 30:

TABLE 30

Percent Morphine Dissolved			
Time Hrs	Initial	37°C/80% RH after 1 Mo	60°C after 1 Mo
1	15.7	16.6	15.3
4	53.0	51.4	54.9
8	84.4	83.3	90.4
12	96.5	94.4	96.9

EXAMPLE 12 A second experiment was conducted with morphine as described in Example 11; however, the retardant Aquacoat[®] layer was applied to a 15% weight gain to develop a slower releasing morphine product. The final formulation is set forth in Table 31:

[0090]

TABLE 31

Ingredient	Mg/capsule	Percent
Morphine sulphate 5H ₂ O	30.0	7.65%
Nu-pariel beads 18/20	255.0	65.0%
Opadry [®] Clear Y-5-7095	15.0	3.82%
Opadry [®] Lavender YS-1-4729	15.8	4.03%
Aquacoat [®] ECD30 (solids)	47.4	12.08%
Triethyl citrate	9.5	2.42%
Opadry [®] Lavender Y-S-1-4729	19.6	5.00%
	392.3	100%

[0091] An initial dissolution of the 30 mg morphine sulphate capsules was conducted as described in Example 10 and again after storage at 37°C/100% relative humidity and 60°C dry for one month. It was again observed that a stable product was made. The results are set forth in Table 32 below:

TABLE 32

Percent Morphine Dissolved			
Time Hrs	Initial	37°C/80%RH after 1 Mo	60°C after 1 Mo
1	0	3.1	0
4	18.1	19.4	17.8
8	49.2	49.4	45.7
12	66.3	68.2	65.9

EXAMPLES 13-14

[0092] In Example 13, the applicability of another medicament, theophylline, having very different physical properties compared to hydromorphone is demonstrated.

[0093] Theophylline hydrous and colloidal silicon dioxide were first mixed together in a high shear mixer, then sieved using a Jet sieve to enhance flowability. Using a fluid bed granulator equipped with a rotor processor, sugar

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spheres were layered with the theophylline/colloidal silicon dioxide mixture using a PVP (C-30) solution. Layering was continued until an approximately 78% load was obtained.

[0094] The formula of the 400mg theophylline beads when filled into capsules is set forth in Table 33 as follows:

TABLE 33

	Mg/unit capsules
Theophylline hydrous (equivalent to 400 mg anhydrous theophylline)	440.0
Colloidal silicon dioxide	0.4
Sugar spheres 30/35 mesh	110.0
PVP (C-30)	13.5
	563.9

[0095] These spheres were then overcoated with a dibutylsebacate plasticized Aquacoat® ECD 30 retardant to a 5% weight gain in the Wurster column in a fluid bed granulator. A portion of the spheres was not cured, and another portion was stored at 60°C and 100% relative humidity for 72 hours. The following results set forth in Table 34 were obtained:

TABLE 34

	1 hr	2 hr	3 hr	4 hr	6 hr	8 hr	24 hr
Initial(uncured)	9.0	92.8	94.6	95.4	97.8	98.0	100.0
72 hours at 60°C/85% RH	3.2	5.3	7.0	7.9	11.0	14.1	35.8

[0096] From the above, it was determined that theophylline spheroids coated with Aquacoat® also we not stable and need to be cured. After storage at 72 hours at 60°C and 85% relative humidity, a dramatic drop in dissolution rate occurred; however, such conditions may, in some instances, represent "ideal" curing conditions to form a stable product. In view of this goal, the dissolution data after 72 hours at 60°C/85tRH provides too slow a dissolution profile for theophylline.

[0097] Therefore, Example 14 was prepared in order to attempt to improve the dissolution profile of the formulation via incorporation of this new curing step, and the coating was altered in order to increase the dissolution rate to 100% theophylline dissolved in 12 hours.

[0098] Example 14 was prepared as follows. Theophylline powder layered beads were made as described in Example 13 and were then overcoated with a plasticized Aquacoat® ECD 30 retardant, which, and for this example, included 10% HPMC (hydroxypropyl methyl cellulose). This was done so that the release of theophylline would be faster than Example 13. The inclusion of HPMC to speed up dissolution is known in the prior art. The retardant layer was also coated to a 6% weight gain in the Wurster column of the fluid bed granulator.

[0099] The coated beads were then cured for 72 hours at 60°C/85% relative humidity. A dissolution study was conducted initially, and once again after the beads were stored at 37°C/80% relative humidity for three months. It was observed that the stability of the dissolution of the theophylline from the formulation of Example 14 improved dramatically compared to Example 13. It was further observed that by inclusion of HPMC in the retardant layer in the proportions of Aquacoat® ECD 30 (solids):HPMC of 9:1, coated to a 6% weight gain, the dissolution rate of the formulation was increased to 100% theophylline dissolved in 12 hours. The results are set forth in detail in Table 35 below:

TABLE 35

	1 hr	2 hr	4 hr	8 hr	12 hr
Cured Initial	17	38	68	97	100
Storage at 37°C/80%RH for 3 months	13	31	60	94	100

[0100] The examples provided above are not meant to be exclusive. Many other variations of the present invention

would be obvious to those skilled in the art.

[0101] For example, although the present invention has been described with respect to the most preferred hydrophobic polymer, ethylcellulose, it is contemplated that other hydrophobic polymers, such as other cellulose derivatives, may also be useful in conjunction with the present invention. Such other hydrophobic polymers are considered to be within the scope of the appended claims.

[0102] Likewise, as previously explained, one skilled in the art will recognize that necessary curing conditions may be change somewhat depending upon the particular formulation (including the amount of overcoating, the properties of the therapeutically active agent, etc.), such that a stabilized product is obtained via a modified range with regard to temperature, humidity and time. Such variations are contemplated to be within the scope of the appended claims.

Claims

Claims for the following Contracting States : AT, BE, CH, DE, DK, FR, GB, IT, LI, LU, NL, PT, SE

1. A method for obtaining a stabilized controlled release formulation comprising a substrate coated with an aqueous dispersion of ethylcellulose, comprising
 - preparing a solid substrate comprising a therapeutically active agent,
 - overcoating said substrate with a sufficient amount of an aqueous dispersion of plasticized ethylcellulose to obtain a predetermined controlled release of said therapeutically active agent when said coated substrate is exposed to aqueous solutions as gastric fluid, by subjecting said coated substrate to a temperature greater than the glass transition temperature of the aqueous dispersion of ethylcellulose and at a greater than ambient relative humidity and continuing the curing until an endpoint is reached at which said substrate attains a changed dissolution profile which is substantially unaffected by further exposure to storage conditions of elevated temperature and/or humidity.
2. The method of claim 1, further comprising determining the endpoint for the formulation by exposing the formulation which is uncured or substantially uncured to stressed storage conditions and obtaining dissolution profiles for the formulation until the dissolution profiles of the formulation are substantially stabilized.
3. The method of claims 1 or 2, further comprising modifying the formulation to obtain a desired dissolution profile of said therapeutically active agent based on said end point.
4. The method of claims 1 to 3, further comprising preparing said substrate for oral administration by coating said therapeutically active agent onto the surface of pharmaceutically acceptable beads, and preparing an oral dosage form by placing a sufficient quantity of cured coated beads into a capsule.
5. The method of claims 1 to 4, further comprising preparing said substrate for oral administration by incorporating said therapeutically active agent into a tablet.
6. The method of claims 1 to 5, further comprising overcoating said substrate comprising said therapeutically active agent with a barrier agent prior to overcoating with said aqueous dispersion of ethylcellulose.
7. The method of claims 1 to 6, wherein said barrier agent comprises hydroxypropyl methylcellulose.
8. The method of claims 1 to 7, wherein said coated particles are cured from about 60% to about 100% relative humidity at an elevated temperature above the glass transition temperature of the coating for about 48 to about 72 hours, until the endpoint is reached.
9. The method of claims 1 to 8, wherein said therapeutically active agent is selected from the group consisting of anti-histamines, analgesics, anti-inflammatory agents, gastro-intestinals, anti-emetics, anti-epileptics, vasodilators, anti-tussive agents, expectorants, anti-asthmatics, anti-spasmodics, hormones, diuretics, anti-hypotensives, bronchodilators, anti-inflammatory steroids, antibiotics, antihemorrhoidals, hypnotics, psychotropics, antidiarrheals, mucolytics: sedatives, decongestants, laxatives, antacids, vitamins, and stimulants.
10. The method of claims 1 to 9, wherein said therapeutically active agent is selected from the group consisting of hydromorphone, oxycodone, dihydrocodeine, codeine, dihydromorphone, morphine, buprenorphine, salts of any of the foregoing, and mixtures of any of the foregoing.

11. The method of claims 1 to 10, wherein said therapeutically active agent is theophylline.

12. The product prepared according to the method of claims 1 to 11.

13. A stabilized solid controlled release dosage form obtainable according to the method of claims 1 to 11, comprising a substrate comprising a therapeutically active agent, said substrate overcoated with an aqueous dispersion of plasticized ethylcellulose

14. The stabilized solid controlled release dosage form of claim 13, wherein said therapeutically active agent is overcoated with said aqueous dispersion of ethylcellulose to a weight gain level from about 5 to about 15 percent.

15. The stabilized solid controlled release dosage form of claim 14, further comprising an inert pharmaceutically acceptable bead onto which said therapeutically active agent is coated.

16. The stabilized solid controlled release dosage form of claim 15, wherein a plurality of said coated, cured beads are placed in a capsule in an amount sufficient to provide an effective controlled release dose when contacted by an aqueous solution.

17. The stabilized solid controlled release dosage form of claim 13, wherein said therapeutically active agent is selected from the group according to claims 9 to 11.

18. A stabilized controlled release solid dosage form obtainable according to the method of claims 1 to 11 for oral administration, comprising a plurality of suitable inert pharmaceutically acceptable beads coated with a therapeutically active agent, and an ethylcellulose overcoat of a thickness suitable to obtain a controlled release of said therapeutically active agent when said solid dosage form is exposed to aqueous solutions, said ethylcellulose overcoat being derived from an aqueous dispersion of ethylcellulose with an effective amount of a suitable plasticizing agent.

19. The stabilized controlled release solid dosage form of claim 18 which is cured at a temperature above the glass transition temperature of the plasticized ethylcellulose coating and at a relative humidity from about 60 to about 100 percent for about 48 to about 72 hours.

20. The stabilized solid controlled release dosage form of claim 18, wherein a plurality of said coated, cured beads are placed in a capsule in an amount sufficient to provide an effective controlled release dose when contacted by an aqueous solution.

21. The stabilized solid controlled release dosage form of claim 18, wherein said therapeutically active agent is selected from the group according to claims 9 to 11.

22. A solid dosage form obtainable according to the method of claims 1 to 11 comprising a core comprising a therapeutically active agent and an overcoating derived from an aqueous dispersion of ethylcellulose in an amount sufficient to obtain a controlled release of said therapeutically active agent when said dosage form is exposed to aqueous solutions, said solid dosage form being cured after said overcoating is applied such that the release of said therapeutically active agent is substantially unaffected by exposure to elevated temperature and/or humidity.

23. A stabilized solid controlled release dosage form obtainable according to the method of claims 1 to 11 comprising a substrate comprising a therapeutically active agent, said substrate overcoated with a controlled release coating derived from an aqueous dispersion of ethylcellulose which has been stabilized by curing at a temperature and relative humidity elevated to a suitable level above ambient conditions for a time period necessary to obtain a final product which exhibits an in vitro release of said therapeutically active agent which is substantially unaffected by exposure to storage conditions of elevated temperature and/or elevated relative humidity.

Claims for the following Contracting State : ES

1. A process for preparing a stabilized controlled release formulation comprising a substrate coated with an aqueous dispersion of ethylcellulose, comprising

- preparing a solid substrate comprising a therapeutically active agent,
- overcoating said substrate with a sufficient amount of an aqueous dispersion of plasticized ethylcellulose to

obtain a predetermined controlled release of said therapeutically active agent when said coated substrate is exposed to aqueous solutions, such as gastric fluid, by subjecting said coated substrate to a temperature greater than the glass transition temperature of the aqueous dispersion of ethylcellulose and at a greater than ambient relative humidity and continuing the curing until an endpoint is reached at which said substrate attains a changed dissolution profile which is substantially unaffected by further exposure to storage conditions of elevated temperature and/or humidity.

2. The process of claim 1, further comprising determining the endpoint for the formulation by exposing the formulation which is uncured or substantially uncured to stressed storage conditions and obtaining dissolution profiles for the formulation until the dissolution profiles of the formulation are substantially stabilized.
3. The process of claims 1 or 2, further comprising modifying the formulation to obtain a desired dissolution profile of said therapeutically active agent based on said end point.
4. The process of claims 1 to 3, further comprising preparing said substrate for oral administration by coating said therapeutically active agent onto the surface of pharmaceutically acceptable beads, and preparing an oral dosage form by placing a sufficient quantity of cured coated beads into a capsule.
5. The process of claims 1 to 4, further comprising preparing said substrate for oral administration by incorporating said therapeutically active agent into a tablet.
6. The process of claims 1 to 5, further comprising overcoating said substrate comprising said therapeutically active agent with a barrier agent prior to overcoating with said aqueous dispersion of ethylcellulose.
7. The process of claims 1 to 6, wherein said barrier agent comprises hydroxypropyl methylcellulose.
8. The process of claims 1 to 7, wherein said coated particles are cured from about 60% to about 100% relative humidity at an elevated temperature above the glass transition temperature of the coating for about 48 to about 72 hours, until the endpoint is reached.
9. The process of claims 1 to 8, wherein said therapeutically active agent is selected from the group consisting of anti-histamines, analgesics, anti-inflammatory agents, gastro-intestinals, anti-emetics, anti-epileptics, vasodilators, anti-tussive agents, expectorants, anti-asthmatics, anti-spasmodics, hormones, diuretics, anti-hypotensives, bronchodilators, anti-inflammatory steroids, antibiotics, antihemorrhoidals, hypnotics, psychotropics, antidiarrheals, mucolytics, sedatives, decongestants, laxatives, antacids, vitamins, and stimulants.
10. The process of claims 1 to 9, wherein said therapeutically active agent is selected from the group consisting of hydromorphone, oxycodone, dihydrocodeine, codeine, dihydromorphone, morphine, buprenorphine, salts of any of the foregoing, and mixtures of any of the foregoing.
11. The process of claims 1 to 10, wherein said therapeutically active agent is theophylline.
12. A process for preparing a stabilized solid controlled release dosage form obtainable according to the method of claims 1 to 11, comprising a substrate comprising a therapeutically active agent, said substrate overcoated with an aqueous dispersion of plasticized ethylcellulose.
13. The process for preparing the stabilized solid controlled release dosage form of claim 12, wherein said therapeutically active agent is overcoated with said aqueous dispersion of ethylcellulose to a weight gain level from about 5 to about 15 percent.
14. The process for preparing the stabilized solid controlled release dosage form of claim 13, further comprising an inert pharmaceutically acceptable bead onto which said therapeutically active agent is coated.
15. The process for preparing the stabilized solid controlled release dosage form of claim 14, wherein a plurality of said coated, cured beads are placed in a capsule in an amount sufficient to provide an effective controlled release dose when contacted by an aqueous solution.
16. The process for preparing the stabilized solid controlled release dosage form of claim 12, wherein said therapeutically

cally active agent is selected from the group according to claims 9 to 11.

17. A process for preparing a stabilized controlled release solid dosage form obtainable according to the method of claims 1 to 11 for oral administration, comprising a plurality of suitable inert pharmaceutically acceptable beads coated with a therapeutically active agent, and an ethylcellulose overcoat of a thickness suitable to obtain a controlled release of said therapeutically active agent when said solid dosage form is exposed to aqueous solutions, said ethylcellulose overcoat being derived from an aqueous dispersion of ethylcellulose with an effective amount of a suitable plasticizing agent.
18. The process for preparing the stabilized controlled release solid dosage form of claim 17, which is cured at a temperature above the glass transition temperature of the plasticized ethylcellulose coating and at a relative humidity from about 60 to about 100 percent for about 48 to about 72 hours.
19. The process for preparing the stabilized solid controlled release dosage form of claim 17, wherein a plurality of said coated, cured beads are placed in a capsule in an amount sufficient to provide an effective controlled release dose when contacted by an aqueous solution.
20. The process for preparing the stabilized solid controlled release dosage form of claim 17, wherein said therapeutically active agent is selected from the group according to claims 9 to 11.
21. A process for preparing a solid dosage form obtainable according to the method of claims 1 to 11, comprising a core comprising a therapeutically active agent and an overcoating derived from an aqueous dispersion of ethylcellulose in an amount sufficient to obtain a controlled release of said therapeutically active agent when said dosage form is exposed to aqueous solutions, said solid dosage form being cured after said overcoating is applied such that the release of said therapeutically active agent is substantially unaffected by exposure to elevated temperature and/or humidity.
22. A process for preparing a stabilized solid controlled release dosage form obtainable according to the method of claims 1 to 11, comprising a substrate comprising a therapeutically active agent, said substrate overcoated with a controlled release coating derived from an aqueous dispersion of ethylcellulose which has been stabilized by curing at a temperature and relative humidity elevated to a suitable level above ambient conditions for a time period necessary to obtain a final product which exhibits an in vitro release of said therapeutically active agent which is substantially unaffected by exposure to storage conditions of elevated temperature and/or elevated relative humidity.

Claims for the following Contracting State : GR

1. A process for preparing a stabilized controlled release formulation comprising a substrate coated with an aqueous dispersion of ethylcellulose, comprising
 - preparing a solid substrate comprising a therapeutically active agent,
 - overcoating said substrate with a sufficient amount of an aqueous dispersion of plasticized ethylcellulose to obtain a predetermined controlled release of said therapeutically active agent when said coated substrate is exposed to aqueous solutions, such as gastric fluid, by subjecting said coated substrate to a temperature greater than the glass transition temperature of the aqueous dispersion of ethylcellulose and at a greater than ambient relative humidity and continuing the curing until an endpoint is reached at which said substrate attains a changed dissolution profile which is substantially unaffected by further exposure to storage conditions of elevated temperature and/or humidity.
2. The process of claim 1, further comprising determining the endpoint for the formulation by exposing the formulation which is uncured or substantially uncured to stressed storage conditions and obtaining dissolution profiles for the formulation until the dissolution profiles of the formulation are substantially stabilized.
3. The process of claims 1 or 2, further comprising modifying the formulation to obtain a desired dissolution profile of said therapeutically active agent based on said end point.
4. The process of claims 1 to 3, further comprising preparing said substrate for oral administration by coating said therapeutically active agent onto the surface of pharmaceutically acceptable beads, and preparing an oral dosage form by placing a sufficient quantity of cured coated beads into a capsule.

5. The process of claims 1 to 4, further comprising preparing said substrate for oral administration by incorporating said therapeutically active agent into a tablet.
6. The process of claims 1 to 5, further comprising overcoating said substrate comprising said therapeutically active agent with a barrier agent prior to overcoating with said aqueous dispersion of ethylcellulose.
7. The process of claims 1 to 6, wherein said barrier agent comprises hydroxypropyl methylcellulose.
8. The process of claims 1 to 7, wherein said coated particles are cured from about 60% to about 100% relative humidity at an elevated temperature above the glass transition temperature of the coating for about 48 to about 72 hours, until the endpoint is reached.
9. The process of claims 1 to 8, wherein said therapeutically active agent is selected from the group consisting of anti-histamines, analgesics, anti-inflammatory agents, gastro-intestinals, anti-emetics, anti-epileptics, vasodilators, anti-tussive agents, expectorants, anti-asthmatics, anti-spasmodics, hormones, diuretics, anti-hypotensives, bronchodilators, anti-inflammatory steroids, antibiotics, antihemorrhoidals, hypnotics, psychotropics, antidiarrheals, mucolytics, sedatives, decongestants, laxatives, antacids, vitamins, and stimulants.
10. The process of claims 1 to 9, wherein said therapeutically active agent is selected from the group consisting of hydromorphone, oxycodone, dihydrocodeine, codeine, dihydromorphone, morphine, buprenorphine, salts of any of the foregoing, and mixtures of any of the foregoing.
11. The process of claims 1 to 10, wherein said therapeutically active agent is theophylline.
12. A process for preparing a stabilized solid controlled release dosage form obtainable according to the method of claims 1 to 11, comprising a substrate comprising a therapeutically active agent, said substrate overcoated with an aqueous dispersion of plasticized ethylcellulose.
13. The process for preparing the stabilized solid controlled release dosage form of claim 12, wherein said therapeutically active agent is overcoated with said aqueous dispersion of ethylcellulose to a weight gain level from about 5 to about 15 percent.
14. The process for preparing the stabilized solid controlled release dosage form of claim 13, further comprising an inert pharmaceutically acceptable bead onto which said therapeutically active agent is coated.
15. The process for preparing the stabilized solid controlled release dosage form of claim 14, wherein a plurality of said coated, cured beads are placed in a capsule in an amount sufficient to provide an effective controlled release dose when contacted by an aqueous solution.
16. The process for preparing the stabilized solid controlled release dosage form of claim 12, wherein said therapeutically active agent is selected from the group according to claims 9 to 11.
17. A process for preparing a stabilized controlled release solid dosage form obtainable according to the method of claims 1 to 11 for oral administration, comprising a plurality of suitable inert pharmaceutically acceptable beads coated with a therapeutically active agent, and an ethylcellulose overcoat of a thickness suitable to obtain a controlled release of said therapeutically active agent when said solid dosage form is exposed to aqueous solutions, said ethylcellulose overcoat being derived from an aqueous dispersion of ethylcellulose with an effective amount of a suitable plasticizing agent.
18. The process for preparing the stabilized controlled release solid dosage form of claim 17, which is cured at a temperature above the glass transition temperature of the plasticized ethylcellulose coating and at a relative humidity from about 60 to about 100 percent for about 48 to about 72 hours.
19. The process for preparing the stabilized solid controlled release dosage form of claim 17, wherein a plurality of said coated, cured beads are placed in a capsule in an amount sufficient to provide an effective controlled release dose when contacted by an aqueous solution.
20. The process for preparing the stabilized solid controlled release dosage form of claim 17, wherein said therapeuti-

cally active agent is selected from the group according to claims 9 to 11.

21. A process for preparing a solid dosage form obtainable according to the method of claims 1 to 11, comprising a core comprising a therapeutically active agent and an overcoating derived from an aqueous dispersion of ethylcellulose in an amount sufficient to obtain a controlled release of said therapeutically active agent when said dosage form is exposed to aqueous solutions, said solid dosage form being cured after said overcoating is applied such that the release of said therapeutically active agent is substantially unaffected by exposure to elevated temperature and/or humidity.
22. A process for preparing a stabilized solid controlled release dosage form obtainable according to the method of claims 1 to 11, comprising a substrate comprising a therapeutically active agent, said substrate overcoated with a controlled release coating derived from an aqueous dispersion of ethylcellulose which has been stabilized by curing at a temperature and relative humidity elevated to a suitable level above ambient conditions for a time period necessary to obtain a final product which exhibits an in vitro release of said therapeutically active agent which is substantially unaffected by exposure to storage conditions of elevated temperature and/or elevated relative humidity.

Patentansprüche

Patentansprüche für folgende Vertragsstaaten : AT, BE, CH, DE, DK, FR, GB, IT, LI, LU, NL, PT, SE

1. Verfahren zur Herstellung einer stabilisierten Formulierung mit kontrollierter Freisetzung, umfassend ein Substrat, das mit einer wässrigen Dispersion von Ethylcellulose beschichtet ist, umfassend:
 - die Herstellung eines festen Substrats, welches ein therapeutisch wirksames Mittel umfasst,
 - das Beschichten des Substrats mit einer ausreichenden Menge einer wässrigen Dispersion von plastifizierter Ethylcellulose, um eine vorherbestimmte kontrollierte Freisetzung des therapeutisch wirksamen Mittels zu erhalten, wenn das beschichtete Substrat wässrigen Lösungen wie Magenflüssigkeit ausgesetzt ist, indem das beschichtete Substrat einer Temperatur, die größer ist als die Glasübergangstemperatur der wässrigen Dispersion von Ethylcellulose, und einer relativen Feuchtigkeit, die größer ist als die der Umgebung, ausgesetzt wird und das Aushärten bis zum Erreichen eines Endpunkts fortgeführt wird, bei dem das Substrat ein verändertes Löslichkeitsprofil erlangt, welches durch weiteres Aussetzen an Lagerbedingungen mit erhöhter Temperatur und/oder Feuchtigkeit im wesentlichen nicht beeinflusst wird.
2. Verfahren nach Anspruch 1, ferner umfassend die Bestimmung des Endpunkts für die Formulierung durch Aussetzen der Formulierung, die ungehärtet oder im wesentlichen nicht gehärtet ist, an Belastungsbedingungen bei der Lagerung und Ermittlung der Löslichkeitsprofile für die Formulierung, bis die Löslichkeitsprofile der Formulierung im wesentlichen stabilisiert sind.
3. Verfahren nach Anspruch 1 oder 2, ferner umfassend die Modifizierung der Formulierung, um ein gewünschtes Löslichkeitsprofil des therapeutisch wirksamen Mittels in Bezug auf das Endpunkt zu erhalten.
4. Verfahren nach einem der Ansprüche 1 bis 3, ferner umfassend die Herstellung des Substrats zur oralen Verabreichung durch Beschichten der Oberfläche von pharmazeutisch verträglichen Partikeln mit dem therapeutisch wirksamen Mittel, und Herstellung einer oralen Arzneimittelform durch Einbringung einer ausreichenden Menge an gehärteten, beschichteten Partikeln in eine Kapsel.
5. Verfahren nach einem der Ansprüche 1 bis 4, ferner umfassend die Herstellung des Substrats zur oralen Verabreichung durch Einbringung des therapeutisch wirksamen Mittels in eine Tablette.
6. Verfahren nach einem der Ansprüche 1 bis 5, ferner umfassend das Beschichten des das therapeutisch wirksame Mittel umfassenden Substrats mit einem Sperrschichtmittel vor der Beschichtung mit der wässrigen Dispersion von Ethylcellulose.
7. Verfahren nach einem der Ansprüche 1 bis 6, wobei das Sperrschichtmittel Hydroxypropylcellulose umfasst.
8. Verfahren nach einem der Ansprüche 1 bis 7, wobei die beschichteten Partikel bei einer relativen Feuchtigkeit von etwa 60% bis etwa 100% und bei einer erhöhten Temperatur oberhalb der Glasübergangstemperatur der Beschichtung für etwa 48 bis etwa 72 Stunden gehärtet werden, bis der Endpunkt erreicht wird.

9. Verfahren nach einem der Ansprüche 1 bis 8, wobei das therapeutisch wirksame Mittel ausgewählt wird aus der Gruppe, bestehend aus Antihistaminen, Analgetika, entzündungshemmenden Mitteln, Magen-Darm-Mitteln, Antiemetika, Antiepileptika, Vasodilatoren, Hustenmitteln, Expektoranzien, Antiasthmatica, Spasmolytika, Hormonen, Diuretika, Antihypertonika, Bronchodilatoren, entzündungshemmenden Steroiden, Antibiotika, Antihämorrhoiden-Mitteln, Hypnotika, Psychopharmaka, Antidiarrhöika, schleimlösenden Mitteln, Sedativa, abschwellenden Mitteln, Laxantia, säurebindenden Mitteln, Vitaminen und Stimulanzien.
5
10. Verfahren nach einem der Ansprüche 1 bis 9, wobei das therapeutisch wirksame Mittel ausgewählt wird aus der Gruppe, bestehend aus Hydromorphon, Oxycodon, Dihydrocodein, Codein, Dihydromorphin, Morphin, Buprenorphin, Salzen der vorstehenden Mittel, sowie Mischungen der vorstehenden Mittel.
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11. Verfahren nach einem der Ansprüche 1 bis 10, wobei das therapeutisch wirksame Mittel Theophyllin ist.
12. Produkt, hergestellt gemäß dem Verfahren nach einem der Ansprüche 1 bis 11.
15
13. Feste, stabilisierte Arzneimittelform mit kontrollierter Freisetzung, herstellbar nach einem Verfahren der Ansprüche 1 bis 11, umfassend ein Substrat, welches ein therapeutisch wirksames Mittel umfasst, wobei das Substrat mit einer wässrigen Dispersion von plastifizierter Ethylcellulose beschichtet ist.
- 20 14. Feste, stabilisierte Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 13, wobei das therapeutisch wirksame Mittel mit der wässrigen Dispersion von Ethylcellulose bis zu einem Gewichtszunahmegrad von etwa 5 bis etwa 15 Prozent beschichtet ist.
- 25 15. Feste, stabilisierte Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 14, ferner umfassend ein inertes, pharmazeutisch verträgliches Partikel, auf das das therapeutisch wirksame Mittel beschichtet ist.
16. Feste, stabilisierte Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 15, wobei eine Vielzahl der beschichteten, gehärteten Partikel in eine Kapsel in einer Menge eingebracht sind, die ausreichend ist, um eine wirksame kontrollierte Freisetzungsdosis bei Kontakt mit einer wässrigen Lösung bereitzustellen.
30
17. Feste, stabilisierte Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 13, wobei das therapeutisch wirksame Mittel ausgewählt ist aus der Gruppe nach einem der Ansprüche 9 bis 11.
- 35 18. Feste, stabilisierte Arzneimittelform mit kontrollierter Freisetzung zur oralen Verabreichung, herstellbar gemäß dem Verfahren nach einem der Ansprüche 1 bis 11, umfassend eine Vielzahl von geeigneten inerten, pharmazeutisch verträglichen Partikeln, die mit einem therapeutisch wirksamen Mittel beschichtet sind, und eine Ethylcellulosebeschichtung von einer Dicke, die geeignet ist, um eine kontrollierte Freisetzung des therapeutisch wirksamen Mittels zu erhalten, wenn die feste Arzneimittelform wässrigen Lösungen ausgesetzt ist, wobei die Ethylcellulosebeschichtung von einer wässrigen Dispersion von Ethylcellulose mit einer wirksamen Menge eines geeigneten plastifizierenden Mittels abgeleitet ist.
40
19. Feste, stabilisierte Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 18, die bei einer Temperatur oberhalb der Glasübergangstemperatur der plastifizierten Ethylcellulosebeschichtung und bei einer relativen Feuchtigkeit von etwa 60 bis etwa 100 Prozent für etwa 48 bis etwa 72 Stunden ausgehärtet ist.
45
20. Feste, stabilisierte Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 18, wobei eine Vielzahl der beschichteten, gehärteten Partikel in eine Kapsel in einer Menge eingebracht ist, die ausreichend ist, um eine wirksame kontrollierte Freisetzungsdosis bei Kontakt mit einer wässrigen Lösung bereitzustellen.
- 50 21. Feste, stabilisierte Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 18, wobei das therapeutisch wirksame Mittel ausgewählt ist aus der Gruppe nach einem der Ansprüche 9 bis 11.
- 55 22. Feste Arzneimittelform, erhältlich gemäß dem Verfahren nach einem der Ansprüche 1 bis 11, umfassend einen Kern, welcher ein therapeutisch wirksames Mittel umfasst, und eine von einer wässrigen Dispersion von Ethylcellulose abgeleitete Beschichtung in einer Menge, die ausreichend ist, um eine kontrollierte Freisetzung des therapeutisch wirksamen Mittels zu erhalten, wenn die Arzneimittelform wässrigen Lösungen ausgesetzt ist, wobei die feste Arzneimittelform so gehärtet ist, nachdem die Beschichtung aufgetragen worden ist, dass die Freisetzung des therapeutisch wirksamen Mittels durch Aussetzung an erhöhte Temperaturen und/oder Feuchtigkeit im wesentli-

chen nicht beeinflusst ist.

23. Feste, stabilisierte Arzneimittelform mit kontrollierter Freisetzung, herstellbar gemäß dem Verfahren nach einem der Ansprüche 1 bis 11, umfassend ein Substrat, welches ein therapeutisch wirksames Mittel umfasst, wobei das Substrat mit einer Beschichtung zur kontrollierten Freisetzung beschichtet ist, die aus einer wässrigen Ethylcellulosedispersion abgeleitet ist, welche stabilisiert worden ist durch Härten bei einer Temperatur und bei einer relativen Feuchtigkeit, die gegenüber Umgebungsbedingungen zu einem geeigneten Grad erhöht sind, für eine Zeitdauer, die notwendig ist, um ein Endprodukt zu erhalten, welches eine *in vitro*-Freisetzung des therapeutisch wirksamen Mittels aufweist, die durch Aussetzung an Lagerbedingungen mit erhöhter Temperatur und/oder erhöhter relativer Feuchtigkeit im wesentlichen unbeeinflusst ist.

Patentansprüche für folgenden Vertragsstaat : ES

1. Verfahren zur Herstellung einer stabilisierten Formulierung mit kontrollierter Freisetzung, umfassend ein Substrat, das mit einer wässrigen Dispersion von Ethylcellulose beschichtet ist, umfassend:
 - die Herstellung eines festen Substrats, welches ein therapeutisch wirksames Mittel umfasst,
 - das Beschichten des Substrats mit einer ausreichenden Menge einer wässrigen Dispersion von plastifizierter Ethylcellulose, um eine vorherbestimmte kontrollierte Freisetzung des therapeutisch wirksamen Mittels zu erhalten, wenn das beschichtete Substrat wässrigen Lösungen wie Magenflüssigkeit ausgesetzt ist, indem das beschichtete Substrat einer Temperatur ausgesetzt wird, die größer ist als die Glasübergangstemperatur der wässrigen Dispersion von Ethylcellulose, und bei einer relativen Feuchtigkeit, die größer ist als die der relativen Umgebung, und das Aushärten bis zum Erreichen eines Endpunkts fortgeführt wird, bei dem das Substrat ein verändertes Löslichkeitsprofil erlangt, welches durch weiteres Aussetzen an Lagerbedingungen mit erhöhter Temperatur und/oder Feuchtigkeit im wesentlichen nicht beeinflusst wird.
2. Verfahren nach Anspruch 1, ferner umfassend die Bestimmung des Endpunkts für die Formulierung, durch Aussetzen der Formulierung, die ungehärtet oder im wesentlichen nicht gehärtet ist, an Belastungsbedingungen bei der Lagerung und Ermittlung der Löslichkeitsprofile für die Formulierung, bis die Löslichkeitsprofile der Formulierung im wesentlichen stabilisiert sind.
3. Verfahren nach Anspruch 1 oder 2, ferner umfassend die Modifizierung der Formulierung, um ein gewünschtes Löslichkeitsprofil des therapeutisch wirksamen Mittels in Bezug auf das Endpunkt zu erhalten.
4. Verfahren nach einem der Ansprüche 1 bis 3, ferner umfassend die Herstellung des Substrats zur oralen Verabreichung durch Beschichten der Oberfläche von pharmazeutisch verträglichen Partikeln mit dem therapeutisch wirksamen Mittel, und Herstellung einer oralen Arzneimittelform durch Einbringung einer ausreichenden Menge an gehärteten, beschichteten Partikeln in eine Kapsel.
5. Verfahren nach einem der Ansprüche 1 bis 4, ferner umfassend die Herstellung des Substrats zur oralen Verabreichung durch Einbringung des therapeutisch wirksamen Mittels in eine Tablette.
6. Verfahren nach einem der Ansprüche 1 bis 5, ferner umfassend das Beschichten des das therapeutisch wirksame Mittel umfassenden Substrats mit einem Sperrschichtmittel vor der Beschichtung mit der wässrigen Dispersion von Ethylcellulose.
7. Verfahren nach einem der Ansprüche 1 bis 6, wobei das Sperrschichtmittel Hydroxypropylcellulose umfasst.
8. Verfahren nach einem der Ansprüche 1 bis 7, wobei die beschichteten Partikel bei einer relativen Feuchtigkeit von etwa 60% bis etwa 100% und bei einer erhöhten Temperatur oberhalb der Glasübergangstemperatur der Beschichtung für etwa 48 bis etwa 72 Stunden gehärtet werden, bis der Endpunkt erreicht wird.
9. Verfahren nach einem der Ansprüche 1 bis 8, wobei das therapeutisch wirksame Mittel ausgewählt wird aus der Gruppe, bestehend aus Antihistaminen, Analgetika, entzündungshemmenden Mitteln, Magen-Darm-Mitteln, Antiemetika, Antiepileptika, Vasodilatoren, Hustenmitteln, Expektoranzen, Antiasthmatica, Spasmolytika, Hormonen, Diuretika, Antihypertonika, Bronchodilatoren, entzündungshemmenden Steroiden, Antibiotika, Antihämorrhoidenmitteln, Hypnotika, Psychopharmaka, Antidiarrhöika, schleimlösenden Mitteln, Sedativa, abschwellenden Mitteln, Laxantia, säurebindenden Mitteln, Vitaminen und Stimulanzien.

10. Verfahren nach einem der Ansprüche 1 bis 9, wobei das therapeutisch wirksame Mittel ausgewählt wird aus der Gruppe, bestehend aus Hydromorphon, Oxycodon, Dihydrocodein, Codein, Dihydromorphin, Morphin, Buprenorphin, Salzen einer der vorstehenden Mittel, sowie Mischungen einer der vorstehenden Mittel.
- 5 11. Verfahren nach einem der Ansprüche 1 bis 10, wobei das therapeutisch wirksame Mittel Theophyllin ist.
12. Verfahren zur Herstellung einer festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung, die gemäß dem Verfahren nach einem der Ansprüche 1 bis 11 erhältlich ist, umfassend ein Substrat, welches ein therapeutisch wirksames Mittel umfasst, wobei das Substrat mit einer wässrigen Dispersion von plastifizierter Ethylcellulose beschichtet wird.
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13. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 12, wobei das therapeutisch wirksame Mittel mit der wässrigen Dispersion von Ethylcellulose bis zu einem Gewichtszunahmegrad von etwa 5 bis etwa 15 Prozent beschichtet wird.
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14. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 13, ferner umfassend ein inertes, pharmazeutisch verträgliches Partikel, auf das das therapeutisch wirksame Mittel beschichtet wird.
- 20 15. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 14, wobei eine Vielzahl der beschichteten, gehärteten Partikel in eine Kapsel in einer Menge eingebracht werden, die ausreichend ist, um eine wirksame kontrollierte Freisetzungsdosis bei Kontakt mit einer wässrigen Lösung bereitzustellen.
- 25 16. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 12, wobei das therapeutisch wirksame Mittel aus der Gruppe nach einem der Ansprüche 9 bis 11 ausgewählt wird.
17. Verfahren zur Herstellung einer festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung zur oralen Verabreichung, die gemäß dem Verfahren nach einem der Ansprüche 1 bis 11 erhältlich ist, umfassend eine Vielzahl von geeigneten inerten, pharmazeutisch verträglichen Partikeln, die mit einem therapeutisch wirksamen Mittel beschichtet werden, und eine Ethylcellulosebeschichtung von einer Dicke, die geeignet ist, um eine kontrollierte Freisetzung des therapeutisch wirksamen Mittels zu erlangen, wenn die feste Arzneimittelform wässrigen Lösungen ausgesetzt ist, wobei die Ethylcellulosebeschichtung von einer wässrigen Dispersion von Ethylcellulose mit einer wirksamen Menge eines geeigneten plastifizierenden Mittels abgeleitet wird.
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18. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 17, die bei einer Temperatur oberhalb der Glasübergangstemperatur der plastifizierten Ethylcellulosebeschichtung und bei einer relativen Feuchtigkeit von etwa 60 bis etwa 100 Prozent für etwa 48 bis etwa 72 Stunden ausgehärtet wird.
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19. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 17, wobei eine Vielzahl der beschichteten, gehärteten Partikel in eine Kapsel in einer Menge eingebracht wird, die ausreichend ist, um eine wirksame kontrollierte Freisetzungsdosis bei Kontakt mit einer wässrigen Lösung bereitzustellen.
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20. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 17, wobei das therapeutisch wirksame Mittel aus der Gruppe nach einem der Ansprüche 9 bis 11 ausgewählt wird.
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21. Verfahren zur Herstellung einer festen Arzneimittelform mit kontrollierter Freisetzung, die gemäß dem Verfahren nach einem der Ansprüche 1 bis 11 erhältlich ist, umfassend einen Kern, der ein therapeutisch wirksames Mittel umfasst, und eine Beschichtung, die von einer wässrigen Dispersion von Ethylcellulose abgeleitet ist, in einer Menge, die ausreichend ist, um eine kontrollierte Freisetzung des therapeutisch wirksamen Mittels zu erhalten, wenn die Arzneimittelform wässrigen Lösungen ausgesetzt ist, wobei die feste Arzneimittelform gehärtet wird, nachdem die Beschichtung aufgetragen worden ist, so dass die Freisetzung des therapeutisch wirksamen Mittels durch Aussetzung an erhöhte Temperaturen und/oder Feuchtigkeit im wesentlichen nicht beeinflusst wird.
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22. Verfahren zur Herstellung einer festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung, die gemäß dem Verfahren nach einem der Ansprüche 1 bis 11 erhältlich ist, umfassend ein Substrat, welches ein therapeu-

tisch wirksames Mittel umfasst, wobei das Substrat mit einer Beschichtung zur kontrollierten Freisetzung beschichtet wird, die aus einer wässrigen Ethylcellulosedispersion abgeleitet ist welche stabilisiert worden ist durch Härten bei einer Temperatur und bei relativen Feuchtigkeit, welche gegenüber Umgebungsbedingungen zu einem geeigneten Grad erhöht sind, für eine Zeitdauer, die notwendig ist, um ein Endprodukt zu erhalten, welches eine *in vitro*-Freisetzung des therapeutisch wirksamen Mittels aufweist, die durch Aussetzung an Lagerbedingungen mit erhöhter Temperatur und/oder erhöhter relativer Feuchtigkeit im wesentlichen nicht beeinflusst wird.

Patentansprüche für folgenden Vertragsstaat : GR

1. Verfahren zur Herstellung einer stabilisierten Formulierung mit kontrollierter Freisetzung, umfassend ein Substrat, das mit einer wässrigen Dispersion von Ethylcellulose beschichtet ist, umfassend:
 - die Herstellung eines festen Substrats, welches ein therapeutisch wirksames Mittel umfasst,
 - das Beschichten des Substrats mit einer ausreichenden Menge einer wässrigen Dispersion von plastifizierter Ethylcellulose, um eine vorherbestimmte kontrollierte Freisetzung des therapeutisch wirksamen Mittels zu erhalten, wenn das beschichtete Substrat wässrigen Lösungen wie Magenflüssigkeit ausgesetzt ist, indem das beschichtete Substrat einer Temperatur ausgesetzt wird, die größer ist als die Glasübergangstemperatur der wässrigen Dispersion von Ethylcellulose, und bei einer relativen Feuchtigkeit, die größer ist als die der relativen Umgebung, und das Aushärten bis zum Erreichen eines Endpunkts fortgeführt wird, bei dem das Substrat ein verändertes Löslichkeitsprofil erlangt, welches durch weiteres Aussetzen an Lagerbedingungen mit erhöhter Temperatur und/oder Feuchtigkeit im wesentlichen nicht beeinflusst wird.
2. Verfahren nach Anspruch 1, ferner umfassend die Bestimmung des Endpunkts für die Formulierung, durch Aussetzen der Formulierung, die ungehärtet oder im wesentlichen nicht gehärtet ist, an Belastungsbedingungen bei der Lagerung und Ermittlung der Löslichkeitsprofile für die Formulierung, bis die Löslichkeitsprofile der Formulierung im wesentlichen stabilisiert sind.
3. Verfahren nach Anspruch 1 oder 2, ferner umfassend die Modifizierung der Formulierung, um ein gewünschtes Löslichkeitsprofil des therapeutisch wirksamen Mittels in Bezug auf das Endpunkt zu erhalten.
4. Verfahren nach einem der Ansprüche 1 bis 3, ferner umfassend die Herstellung des Substrats zur oralen Verabreichung durch Beschichten der Oberfläche von pharmazeutisch verträglichen Partikeln mit dem therapeutisch wirksamen Mittel, und Herstellung einer oralen Arzneimittelform durch Einbringung einer ausreichenden Menge an gehärteten, beschichteten Partikeln in eine Kapsel.
5. Verfahren nach einem der Ansprüche 1 bis 4, ferner umfassend die Herstellung des Substrats zur oralen Verabreichung durch Einbringung des therapeutisch wirksamen Mittels in eine Tablette.
6. Verfahren nach einem der Ansprüche 1 bis 5, ferner umfassend das Beschichten des das therapeutisch wirksame Mittel umfassenden Substrats mit einem Sperrschichtmittel vor der Beschichtung mit der wässrigen Dispersion von Ethylcellulose.
7. Verfahren nach einem der Ansprüche 1 bis 6, wobei das Sperrschichtmittel Hydroxypropylcellulose umfasst.
8. Verfahren nach einem der Ansprüche 1 bis 7, wobei die beschichteten Partikel bei einer relativen Feuchtigkeit von etwa 60% bis etwa 100% und bei einer erhöhten Temperatur oberhalb der Glasübergangstemperatur der Beschichtung für etwa 48 bis etwa 72 Stunden gehärtet werden, bis der Endpunkt erreicht wird.
9. Verfahren nach einem der Ansprüche 1 bis 8, wobei das therapeutisch wirksame Mittel ausgewählt wird aus der Gruppe, bestehend aus Antihistaminen, Analgetika, entzündungshemmenden Mitteln, Magen-Darm-Mitteln, Antiemetika, Antiepileptika, Vasodilatoren, Hustenmitteln, Expektoranzien, Antiasthmatica, Spasmolytika, Hormonen, Diuretika, Antihypertonika, Bronchodilatoren, entzündungshemmenden Steroiden, Antibiotika, Antihämorrhoidenmitteln, Hypnotika, Psychopharmaka, Antidiarrhöika, schleimlösenden Mitteln, Sedativa, abschwellenden Mitteln, Laxantia, säurebindenden Mitteln, Vitaminen und Stimulanzen.
10. Verfahren nach einem der Ansprüche 1 bis 9, wobei das therapeutisch wirksame Mittel ausgewählt wird aus der Gruppe, bestehend aus Hydromorphon, Oxycodon, Dihydrocodein, Codein, Dihydromorphin, Morphin, Buprenorphin, Salzen einer der vorstehenden Mittel, sowie Mischungen einer der vorstehenden Mittel.

11. Verfahren nach einem der Ansprüche 1 bis 10, wobei das therapeutisch wirksame Mittel Theophyllin ist.
12. Verfahren zur Herstellung einer festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung, die gemäß dem Verfahren nach einem der Ansprüche 1 bis 11 erhältlich ist, umfassend ein Substrat, welches ein therapeutisch wirksames Mittel umfasst, wobei das Substrat mit einer wässrigen Dispersion von plastifizierter Ethylcellulose beschichtet wird.
13. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 12, wobei das therapeutisch wirksame Mittel mit der wässrigen Dispersion von Ethylcellulose bis zu einem Gewichtszunahmegrad von etwa 5 bis etwa 15 Prozent beschichtet wird.
14. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 13, ferner umfassend ein inertes, pharmazeutisch verträgliches Partikel, auf das das therapeutisch wirksame Mittel beschichtet wird.
15. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 14, wobei eine Vielzahl der beschichteten, gehärteten Partikel in eine Kapsel in einer Menge eingebracht werden, die ausreichend ist, um eine wirksame kontrollierte Freisetzungsdosis bei Kontakt mit einer wässrigen Lösung bereitzustellen.
16. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 12, wobei das therapeutisch wirksame Mittel aus der Gruppe nach einem der Ansprüche 9 bis 11 ausgewählt wird.
17. Verfahren zur Herstellung einer festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung zur oralen Verabreichung, die gemäß dem Verfahren nach einem der Ansprüche 1 bis 11 erhältlich ist, umfassend eine Vielzahl von geeigneten inerten, pharmazeutisch verträglichen Partikeln, die mit einem therapeutisch wirksamen Mittel beschichtet werden, und eine Ethylcellulosebeschichtung von einer Dicke, die geeignet ist, um eine kontrollierte Freisetzung des therapeutisch wirksamen Mittels zu erlangen, wenn die feste Arzneimittelform wässrigen Lösungen ausgesetzt ist, wobei die Ethylcellulosebeschichtung von einer wässrigen Dispersion von Ethylcellulose mit einer wirksamen Menge eines geeigneten plastifizierenden Mittels abgeleitet wird.
18. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 17, die bei einer Temperatur oberhalb der Glasübergangstemperatur der plastifizierten Ethylcellulosebeschichtung und bei einer relativen Feuchtigkeit von etwa 60 bis etwa 100 Prozent für etwa 48 bis etwa 72 Stunden ausgehärtet wird.
19. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 17, wobei eine Vielzahl der beschichteten, gehärteten Partikel in eine Kapsel in einer Menge eingebracht wird, die ausreichend ist, um eine wirksame kontrollierte Freisetzungsdosis bei Kontakt mit einer wässrigen Lösung bereitzustellen.
20. Verfahren zur Herstellung der festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung nach Anspruch 17, wobei das therapeutisch wirksame Mittel aus der Gruppe nach einem der Ansprüche 9 bis 11 ausgewählt wird.
21. Verfahren zur Herstellung einer festen Arzneimittelform mit kontrollierter Freisetzung, die gemäß dem Verfahren nach einem der Ansprüche 1 bis 11 erhältlich ist, umfassend einen Kern, der ein therapeutisch wirksames Mittel umfasst, und eine Beschichtung, die von einer wässrigen Dispersion von Ethylcellulose abgeleitet ist, in einer Menge, die ausreichend ist, um eine kontrollierte Freisetzung des therapeutisch wirksamen Mittels zu erhalten, wenn die Arzneimittelform wässrigen Lösungen ausgesetzt ist, wobei die feste Arzneimittelform gehärtet wird, nachdem die Beschichtung aufgetragen worden ist, so dass die Freisetzung des therapeutisch wirksamen Mittels durch Aussetzung an erhöhte Temperaturen und/oder Feuchtigkeit im wesentlichen nicht beeinflusst wird.
22. Verfahren zur Herstellung einer festen, stabilisierten Arzneimittelform mit kontrollierter Freisetzung, die gemäß dem Verfahren nach einem der Ansprüche 1 bis 11 erhältlich ist, umfassend ein Substrat, welches ein therapeutisch wirksames Mittel umfasst, wobei das Substrat mit einer Beschichtung zur kontrollierten Freisetzung beschichtet wird, die aus einer wässrigen Ethylcellulosedispersion abgeleitet ist, welche stabilisiert worden ist durch Härten bei einer Temperatur und bei relativen Feuchtigkeit, welche gegenüber Umgebungsbedingungen zu einem geeigneten Grad erhöht sind, für eine Zeitdauer, die notwendig ist, um ein Endprodukt zu erhalten, welches eine *in vitro*

Freisetzung des therapeutisch wirksamen Mittels aufweist, die durch Aussetzung an Lagerbedingungen mit erhöhter Temperatur und/oder erhöhter relativer Feuchtigkeit im wesentlichen nicht beeinflusst wird.

Revendications

Revendications pour les Etats contractants suivants : AT, BE, CH, DE, DK, FR, GB, IT, LI, LU, NL, PT, SE

1. Procédé d'obtention d'une formulation à libération contrôlée stabilisée comprenant un substrat revêtu d'une dispersion aqueuse d'éthylcellulose, comprenant

- la préparation d'un substrat solide comprenant un agent thérapeutiquement actif,
- le revêtement ("overcoating") dudit substrat avec une quantité suffisante d'une dispersion aqueuse d'éthylcellulose plastifiée pour obtenir une libération contrôlée prédéterminée dudit agent thérapeutiquement actif lorsque ledit substrat revêtu est exposé aux solutions aqueuses, tel que fluide gastrique, on soumettant ledit substrat revêtu à une température plus grande que la température de transition du verre d'une dispersion aqueuse d'éthylcellulose et à une humidité plus grande que l'humidité relative ambiante et la continuation du durcissement jusqu'à atteindre un point limite où ledit substrat obtient un profil de dissolution modifié qui n'est pas sensiblement affecté par une nouvelle exposition aux conditions de stockage de température et/ou humidité élevée.

2. Procédé selon la revendication 1, comprenant en plus la détermination du point limite de la formulation en exposant la formulation qui est à l'état non-durci ou sensiblement à l'état non-durci aux conditions de stockage soumises à effort et l'obtention de profils de dissolution de la formulation jusqu'à ce que les profils de dissolution de la formulation soient sensiblement stabilisés.

3. Procédé selon la revendication 1 ou 2, comprenant en plus la modification de la formulation pour obtenir un profil de dissolution souhaité dudit agent thérapeutiquement actif basé sur ledit point limite.

4. Procédé selon les revendications 1 à 3, comprenant en plus la préparation dudit substrat pour une administration par voie orale en recouvrant ledit agent thérapeutiquement actif sur la surface de billes pharmaceutiquement acceptables et la préparation d'une forme de dosage orale en plaçant une quantité suffisante de billes revêtues à l'état durci ("cured coated beads") à l'intérieur d'une capsule.

5. Procédé selon les revendications 1 à 4, comprenant en plus la préparation dudit substrat pour une administration par voie orale en incorporant ledit agent thérapeutiquement actif à l'intérieur d'un comprimé.

6. Procédé selon les revendications 1 à 5, comprenant en plus le revêtement dudit substrat comprenant ledit agent thérapeutiquement actif avec un agent formant barrière ("barrier agent") avant le revêtement avec ladite dispersion aqueuse d'éthylcellulose.

7. Procédé selon les revendications 1 à 6, dans lequel ledit agent formant barrière comprend l'hydroxypropyl méthylcellulose.

8. Procédé selon les revendications 1 à 7, dans lequel lesdites particules revêtues sont durcies à un taux d'humidité relative compris entre environ 60% et environ 100% à une température élevée au-dessus de la température de transition du verre du revêtement pendant environ 48 à environ 72 heures, jusqu'à ce que le point limite soit atteint.

9. Procédé selon les revendications 1 à 8, dans lequel ledit agent thérapeutiquement actif est choisi dans le groupe formé par les agents antihistaminiques, analgésiques, les agents anti-inflammatoires, gastro-intestinaux, antiémétiques, antiépileptiques, vasodilatateurs, agents anti-tussifs, expectorants, antiasthmatiques, antispasmodiques, hormones, diurétiques, anti-hypotenseurs, broncho-dilatateurs, stéroïdes anti-inflammatoires, antibiotiques, anti-hémorroïdaux, hypnotiques, psychotropes, anti-diarrhéiques, mucolytiques, sédatifs, décongestionnants, laxatifs, antiacides, vitamines, et stimulants.

10. Procédé selon les revendications 1 à 9, dans lequel ledit agent thérapeutiquement actif est choisi dans le groupe formé par l'hydromorphe ("hydromorphe"), oxycodone ("oxycodone"), dihydrocodéine, codéine, dihydromorphine, morphine, buprénorphine ("buprénorphine"), les sels et les mélanges de ceux-ci.

11. Procédé selon les revendications 1 à 10, dans lequel ledit agent thérapeutiquement actif est la théophylline.
12. Produit préparé par le procédé selon les revendications 1 à 11.
- 5 13. Forme de dosage à libération contrôlée solide stabilisée apte à être obtenue par le procédé selon les revendications 1 à 11 comprenant un substrat comprenant un agent thérapeutiquement actif, ledit substrat revêtu d'une dispersion aqueuse d'éthylcellulose plastifiée.
- 10 14. Forme de dosage à libération contrôlée solide stabilisée selon la revendication 13, dans lequel l'agent thérapeutiquement actif est revêtu de ladite dispersion aqueuse d'éthylcellulose à un niveau de gain de poids compris entre environ 5 et environ 15 %.
- 15 15. Forme de dosage à libération contrôlée solide stabilisée selon la revendication 14, comprenant en plus une bille acceptable pharmaceutiquement inerte sur laquelle on a déposé en revêtement ledit agent thérapeutiquement actif.
- 20 16. Forme de dosage à libération contrôlée solide stabilisée selon la revendication 15, dans lequel une pluralité de billes revêtues à l'état durci, sont placées dans une capsule en une quantité suffisante pour mettre en oeuvre une dose à libération contrôlée effective lorsqu'étant en contact avec une solution aqueuse.
- 25 17. Forme de dosage à libération contrôlée solide stabilisée selon la revendication 13, dans lequel ledit agent thérapeutiquement actif est choisi dans le groupe selon les revendications 9 à 11.
- 30 18. Forme de dosage solide à libération contrôlée stabilisée apte à être obtenue par le procédé selon les revendications 1 à 11 pour une administration par voie orale comprenant une pluralité de billes acceptables pharmaceutiquement inertes appropriées revêtues d'un agent thérapeutiquement actif, et un revêtement d'éthylcellulose d'une épaisseur adaptée pour obtenir une libération contrôlée dudit agent thérapeutiquement actif lorsque ladite forme de dosage solide est exposée aux solutions aqueuses, ledit revêtement d'éthylcellulose étant issu d'une dispersion aqueuse d'éthylcellulose avec une quantité effective d'un agent de plastification approprié.
- 35 19. Forme de dosage solide à libération contrôlée stabilisée selon la revendication 18 qui est à l'état durci à une température supérieure à la température de transition du verre du revêtement d'éthylcellulose plastifié et à une humidité relative comprise entre environ 60 et environ 100% pendant environ 48 à environ 72 heures.
- 40 20. Forme de dosage à libération contrôlée solide stabilisée selon la revendication 18, dans lequel une pluralité de billes revêtues à l'état durci sont placées dans une capsule en une quantité suffisante pour mettre en oeuvre une dose à libération contrôlée effective lorsqu'étant en contact avec une solution aqueuse.
- 45 21. Forme de dosage à libération contrôlée solide stabilisée selon la revendication 18, dans lequel ledit agent thérapeutiquement actif est choisi dans le groupe selon les revendications 9 à 11.
- 50 22. Forme de dosage solide apte à être obtenue par le procédé selon les revendications 1 à 11, comprenant un noyau comprenant un agent thérapeutiquement actif et un revêtement dérivé d'une dispersion aqueuse d'éthylcellulose en une quantité suffisante pour obtenir une libération contrôlée dudit agent thérapeutiquement actif lorsque ladite forme de dosage est exposée aux solutions aqueuses, ladite forme de dosage solide étant durcie après que ledit revêtement soit appliqué de telle manière que la libération dudit agent thérapeutiquement actif ne soit pas sensiblement influencée par une exposition aux température et/ou humidité élevées.
- 55 23. Forme de dosage à libération contrôlée solide stabilisée apte à être obtenue par le procédé selon les revendications 1 à 11 comprenant un substrat comprenant un agent thérapeutiquement actif, ledit substrat revêtu d'un revêtement à libération contrôlée dérivé d'une dispersion aqueuse d'éthylcellulose qui a été stabilisée par durcissement à une température et une humidité relative élevées à un niveau approprié supérieur aux conditions ambiantes pendant une période de temps nécessaire pour obtenir un produit fini qui présente une libération in vitro dudit agent thérapeutiquement actif qui n'est pas sensiblement influencé par une exposition aux conditions de stockage de température élevée et/ou d'humidité relative élevée.

Revendications pour l'Etat contractant suivant : ES

1. Procédé de préparation d'une formulation à libération contrôlée stabilisée comprenant un substrat revêtu d'une dispersion aqueuse d'éthylcellulose, comprenant

- la préparation d'un substrat solide comprenant un agent thérapeutiquement actif,
- le revêtement ("overcoating") dudit substrat avec une quantité suffisante d'une dispersion aqueuse d'éthylcellulose plastifiée pour obtenir une libération contrôlée prédéterminée dudit agent thérapeutiquement actif lorsque ledit substrat revêtu est exposé aux solutions aqueuses, tel que fluide gastrique, en soumettant ledit substrat revêtu à une température plus grande que la température de transition du verre d'une dispersion aqueuse d'éthylcellulose et à une humidité plus grande que l'humidité relative ambiante et la continuation du durcissement jusqu'à atteindre un point limite où ledit substrat obtient un profil de dissolution modifié qui n'est sensiblement pas influencé par une nouvelle exposition aux conditions de stockage de température et/ou humidité élevées.

2. Procédé selon la revendication 1, comprenant en plus la détermination du point limite de la formulation en exposant la formulation qui est à l'état non-durci ou sensiblement à l'état non-durci face aux conditions de stockage soumises à effort et l'obtention de profils de dissolution de la formulation jusqu'à ce que les profils de dissolution de la formulation soient sensiblement stabilisés.

3. Procédé selon la revendication 1 ou 2, comprenant en plus la modification de la formulation pour obtenir un profil de dissolution souhaité dudit agent thérapeutiquement actif basé sur ledit point limite.

4. Procédé selon les revendications 1 à 3, comprenant en plus la préparation dudit substrat pour une administration par voie orale en recouvrant ledit agent thérapeutiquement actif sur la surface de billes pharmaceutiquement acceptables et la préparation d'une forme de dosage orale en plaçant une quantité suffisante de billes revêtues à l'état durci ("cured coated beads") à l'intérieur d'une capsule.

5. Procédé selon les revendications 1 à 4, comprenant en plus la préparation dudit substrat pour une administration par voie orale en incorporant ledit agent thérapeutiquement actif à l'intérieur d'un comprimé.

6. Procédé selon les revendications 1 à 5, comprenant en plus le revêtement dudit substrat comprenant ledit agent thérapeutiquement actif avec un agent formant barrière ("barrier agent") avant le revêtement avec ladite dispersion aqueuse d'éthylcellulose.

7. Procédé selon les revendications 1 à 6, dans lequel ledit agent formant barrière comprend l'hydroxypropyl méthylcellulose.

8. Procédé selon les revendications 1 à 7, dans lequel lesdites particules revêtues sont durcies à un taux d'humidité relative compris entre environ 60% et environ 100% à une température élevée au-dessus de la température de transition du verre du revêtement pendant environ 48 à environ 72 heures, jusqu'à ce que le point limite soit atteint.

9. Procédé selon les revendications 1 à 8, dans lequel ledit agent thérapeutiquement actif est choisi dans le groupe formé par les agents antihistaminiques, analgésiques, les agents anti-inflammatoires, gastro-intestinaux, antiémétiques, antiépileptiques, vasodilatateurs, agents anti-tussifs, expectorants, antiasthmatiques, antispasmodiques, hormones, diurétiques, anti-hypotenseurs, broncho-dilatateurs, stéroïdes anti-inflammatoires, antibiotiques, anti-hémorroïdaux, hypnotiques, psychotropes, anti-diarrhéiques, mucolytiques, sédatifs, décongestionnants, laxatifs, antiacides, vitamines, et stimulants.

10. Procédé selon les revendications 1 à 9, dans lequel ledit agent thérapeutiquement actif est choisi dans le groupe formé par l'hydromorphe ("hydromorphe"), oxycodone ("oxycodone"), dihydrocodéine, codéine, dihydromorphine, morphine, buprénorphine ("buprenorphine"), les sels et les mélanges de ceux-ci.

11. Procédé selon les revendications 1 à 10, dans lequel ledit agent thérapeutiquement actif est la théophylline.

12. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée apte à être obtenue par le procédé selon les revendications 1 à 11, comprenant un substrat comprenant un agent thérapeutiquement actif, ledit substrat étant revêtu d'une dispersion aqueuse d'éthylcellulose plastifiée.

13. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée selon la revendication 12, dans lequel ledit agent thérapeutiquement actif est revêtu de ladite dispersion aqueuse d'éthylcellulose à un niveau de gain de poids d'environ 5 à environ 15%.
- 5 14. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée selon la revendication 13, comprenant en plus une bille acceptable pharmaceutiquement inerte sur laquelle on a déposé en revêtement ledit agent thérapeutiquement actif.
- 10 15. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée selon la revendication 14, dans lequel une pluralité de billes revêtues à l'état durci sont placées dans une capsule en une quantité suffisante pour mettre en oeuvre une dose à libération contrôlée effective lorsqu'étant en contact avec une solution aqueuse.
- 15 16. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée selon la revendication 12, dans lequel ledit agent thérapeutiquement actif est choisi dans le groupe selon les revendications 9 à 11.
- 20 17. Procédé de préparation d'une forme de dosage solide à libération contrôlée stabilisée apte à être obtenue par le procédé selon les revendications 1 à 11 pour une administration par voie orale, comprenant une pluralité de billes acceptables pharmaceutiquement inertes appropriées revêtues d'un agent thérapeutiquement actif, et un revêtement d'éthylcellulose d'une épaisseur adaptée pour obtenir une libération contrôlée dudit agent thérapeutiquement actif lorsque ladite forme de dosage solide est exposée aux solutions aqueuses, ledit revêtement d'éthylcellulose étant issu d'une dispersion aqueuse d'éthylcellulose avec une quantité effective d'un agent de plastification approprié.
- 25 18. Procédé de préparation d'une forme de dosage solide à libération contrôlée stabilisée selon la revendication 17, qui est à l'état durci à une température supérieure à la température de transition du verre du revêtement d'éthylcellulose plastifié et à une humidité relative comprise entre environ 60 et environ 100 % pendant environ 48 à environ 72 heures.
- 30 19. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée selon la revendication 17, dans lequel une pluralité de billes, revêtues à l'état durci sont placées dans une capsule en une quantité suffisante pour mettre en oeuvre une dose à libération contrôlée effective lorsqu'étant en contact avec une solution aqueuse.
- 35 20. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée selon la revendication 17, dans lequel ledit agent thérapeutiquement actif est choisi dans le groupe selon les revendications 9 à 11.
- 40 21. Procédé de préparation d'une forme de dosage solide apte à être obtenue par le procédé selon les revendications 1 à 11, comprenant un noyau comprenant un agent thérapeutiquement actif et un revêtement dérivé d'une dispersion aqueuse d'éthylcellulose en une quantité suffisante pour obtenir une libération contrôlée dudit agent thérapeutiquement actif lorsque ladite forme de dosage est exposée aux solutions aqueuses, ladite forme de dosage solide étant durcie après que ledit revêtement soit appliqué de telle manière que la libération dudit agent thérapeutiquement actif ne soit pas sensiblement influencée par une exposition aux températures et/ou humidités élevées.
- 45 22. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée apte à être obtenue par le procédé selon les revendications 1 à 11, comprenant un agent thérapeutiquement actif, ledit substrat revêtu d'un revêtement à libération contrôlée dérivé d'une dispersion aqueuse d'éthylcellulose qui a été stabilisée par durcissement à une température et une humidité relative élevées à un niveau adapté supérieur aux conditions ambiantes pendant une période de temps nécessaire pour obtenir un produit final qui présente une libération in vitro dudit agent thérapeutiquement actif qui n'est pas sensiblement influencé par une exposition aux conditions de stockage de température élevée et/ou humidité relative élevée.

Revendications pour l'Etat contractant suivant : GR

- 55 1. Procédé de préparation d'une formulation à libération contrôlée stabilisée comprenant un substrat revêtu d'une dispersion aqueuse d'éthylcellulose, comprenant
 - la préparation d'un substrat solide comprenant un agent thérapeutiquement actif,
 - le revêtement ("overcoating") dudit substrat avec une quantité suffisante d'une dispersion aqueuse d'éthylcellulose plastifiée pour obtenir une libération contrôlée prédéterminée dudit agent thérapeutiquement actif lors-

que ledit substrat revêtu est exposé aux solutions aqueuses, tel que fluide gastrique, en soumettant ledit substrat revêtu à une température plus grande que la température de transition du verre d'une dispersion aqueuse d'éthylcellulose et à une humidité plus grande que l'humidité relative ambiante et la continuation du durcissement jusqu'à atteindre un point limite où ledit substrat obtient un profil de dissolution modifié qui n'est sensiblement pas influencé par une nouvelle exposition aux conditions de stockage de température et/ou humidité élevées.

2. Procédé selon la revendication 1, comprenant en plus la détermination du point limite de la formulation en exposant la formulation qui est à l'état non-durci ou sensiblement à l'état non-durci face aux conditions de stockage soumises à effort et l'obtention de profils de dissolution de la formulation jusqu'à ce que les profils de dissolution de la formulation soient sensiblement stabilisés.
3. Procédé selon la revendication 1 ou 2, comprenant en plus la modification de la formulation pour obtenir un profil de dissolution souhaité dudit agent thérapeutiquement actif basé sur ledit point limite.
4. Procédé selon les revendications 1 à 3, comprenant en plus la préparation dudit substrat pour une administration par voie orale en recouvrant ledit agent thérapeutiquement actif sur la surface de billes pharmaceutiquement acceptables et la préparation d'une forme de dosage orale en plaçant une quantité suffisante de billes revêtues à l'état durci ("cured coated beads") à l'intérieur d'une capsule.
5. Procédé selon les revendications 1 à 4, comprenant en plus la préparation dudit substrat pour une administration par voie orale en incorporant ledit agent thérapeutiquement actif à l'intérieur d'un comprimé.
6. Procédé selon les revendications 1 à 5, comprenant en plus le revêtement dudit substrat comprenant ledit agent thérapeutiquement actif avec un agent formant barrière ("barrier agent") avant le revêtement avec ladite dispersion aqueuse d'éthylcellulose.
7. Procédé selon les revendications 1 à 6, dans lequel ledit agent formant barrière comprend l'hydroxypropyl méthylcellulose.
8. Procédé selon les revendications 1 à 7, dans lequel lesdites particules revêtues sont durcies à un taux d'humidité relative compris entre environ 60% et environ 100% à une température élevée au-dessus de la température de transition du verre du revêtement pendant environ 48 à environ 72 heures, jusqu'à ce que le point limite soit atteint.
9. Procédé selon les revendications 1 à 8, dans lequel ledit agent thérapeutiquement actif est choisi dans le groupe formé par les agents antihistaminiques, analgésiques, les agents anti-inflammatoires, gastro-intestinaux, antiémétiques, antiépileptiques, vasodilatateurs, agents anti-tussifs, expectorants, antiasthmatiques, antispasmodiques, hormones, diurétiques, anti-hypotenseurs, broncho-dilatateurs, stéroïdes anti-inflammatoires, antibiotiques, anti-hémorroïdaux, hypnotiques, psychotropes, anti-diarrhéiques, mucolytiques, sédatifs, décongestionnants, laxatifs, antiacides, vitamines, et stimulants.
10. Procédé selon les revendications 1 à 9, dans lequel ledit agent thérapeutiquement actif est choisi dans le groupe formé par l'hydromorphe ("hydromorphe"), oxycodone ("oxycodone"), dihydrocodéine, codéine, dihydromorphine, morphine, buprénorphine ("buprénorphine"), les sels et les mélanges de ceux-ci.
11. Procédé selon les revendications 1 à 10, dans lequel ledit agent thérapeutiquement actif est la théophylline.
12. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée apte à être obtenue par le procédé selon les revendications 1 à 11, comprenant un substrat comprenant un agent thérapeutiquement actif, ledit substrat étant revêtu d'une dispersion aqueuse d'éthylcellulose plastifiée.
13. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée selon la revendication 12, dans lequel ledit agent thérapeutiquement actif est revêtu de ladite dispersion aqueuse d'éthylcellulose à un niveau de gain de poids d'environ 5 à environ 15%.
14. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée selon la revendication 13, comprenant en plus une bille acceptable pharmaceutiquement inerte sur laquelle on a déposé en revêtement ledit agent thérapeutiquement actif.

15. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée selon la revendication 14, dans lequel une pluralité de billes revêtues à l'état durci sont placées dans une capsule en une quantité suffisante pour mettre en oeuvre une dose à libération contrôlée effective lorsqu'étant en contact avec une solution aqueuse.
- 5 16. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée selon la revendication 12, dans lequel ledit agent thérapeutiquement actif est choisi dans le groupe selon les revendications 9 à 11.
- 10 17. Procédé de préparation d'une forme de dosage solide à libération contrôlée stabilisée apte à être obtenue par le procédé selon les revendications 1 à 11 pour une administration par voie orale, comprenant une pluralité de billes acceptables pharmaceutiquement inertes appropriées revêtues d'un agent thérapeutiquement actif, et un revêtement d'éthylcellulose d'une épaisseur adaptée pour obtenir une libération contrôlée dudit agent thérapeutiquement actif lorsque ladite forme de dosage solide est exposée aux solutions aqueuses, ledit revêtement d'éthylcellulose étant issu d'une dispersion aqueuse d'éthylcellulose avec une quantité effective d'un agent de plastification approprié.
- 15 18. Procédé de préparation d'une forme de dosage solide à libération contrôlée stabilisée selon la revendication 17, qui est à l'état durci à une température supérieure à la température de transition du verre du revêtement d'éthylcellulose plastifié et à une humidité relative comprise entre environ 60 et environ 100 % pendant environ 48 à environ 72 heures.
- 20 19. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée selon la revendication 17, dans lequel une pluralité de billes, revêtues à l'état durci sont placées dans une capsule en une quantité suffisante pour mettre en oeuvre une dose à libération contrôlée effective lorsqu'étant en contact avec une solution aqueuse.
- 25 20. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée selon la revendication 17, dans lequel ledit agent thérapeutiquement actif est choisi dans le groupe selon les revendications 9 à 11.
- 30 21. Procédé de préparation d'une forme de dosage solide apte à être obtenue par le procédé selon les revendications 1 à 11, comprenant un noyau comprenant un agent thérapeutiquement actif et un revêtement dérivé d'une dispersion aqueuse d'éthylcellulose en une quantité suffisante pour obtenir une libération contrôlée dudit agent thérapeutiquement actif lorsque ladite forme de dosage est exposée aux solutions aqueuses, ladite forme de dosage solide étant durcie après que ledit revêtement soit appliqué de telle manière que la libération dudit agent thérapeutiquement actif ne soit pas sensiblement influencée par une exposition aux température et/ou humidité élevées.
- 35 22. Procédé de préparation d'une forme de dosage à libération contrôlée solide stabilisée apte à être obtenue par le procédé selon les revendications 1 à 11, comprenant un agent thérapeutiquement actif, ledit substrat revêtu d'un revêtement à libération contrôlée dérivé d'une dispersion aqueuse d'éthylcellulose qui a été stabilisée par durcissement à une température et une humidité relative élevées à un niveau adapté supérieur aux conditions ambiantes pendant une période de temps nécessaire pour obtenir un produit final qui présente une libération in vitro dudit agent thérapeutiquement actif qui n'est pas sensiblement influencé par une exposition aux conditions de stockage de température élevée et/ou humidité relative élevée.
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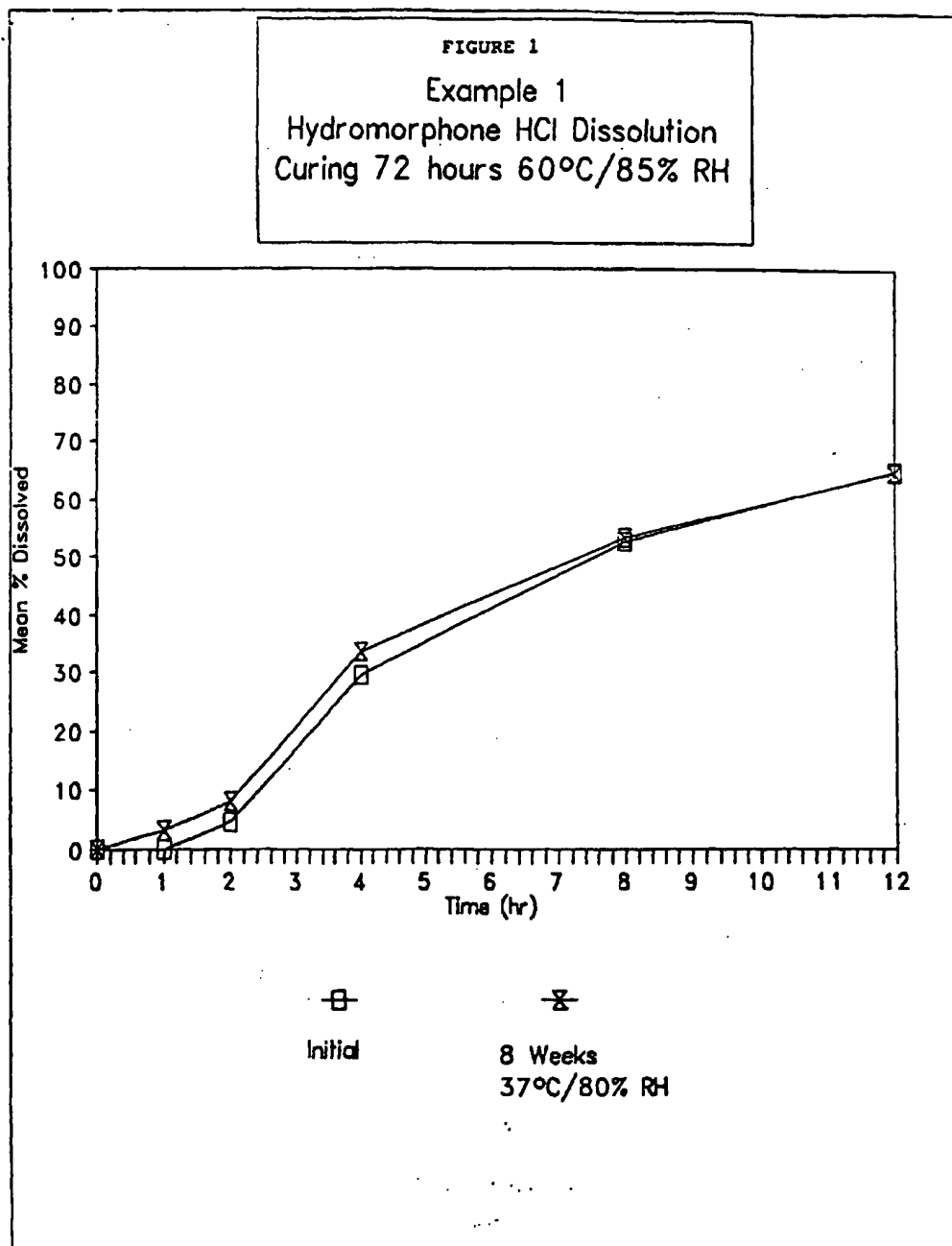
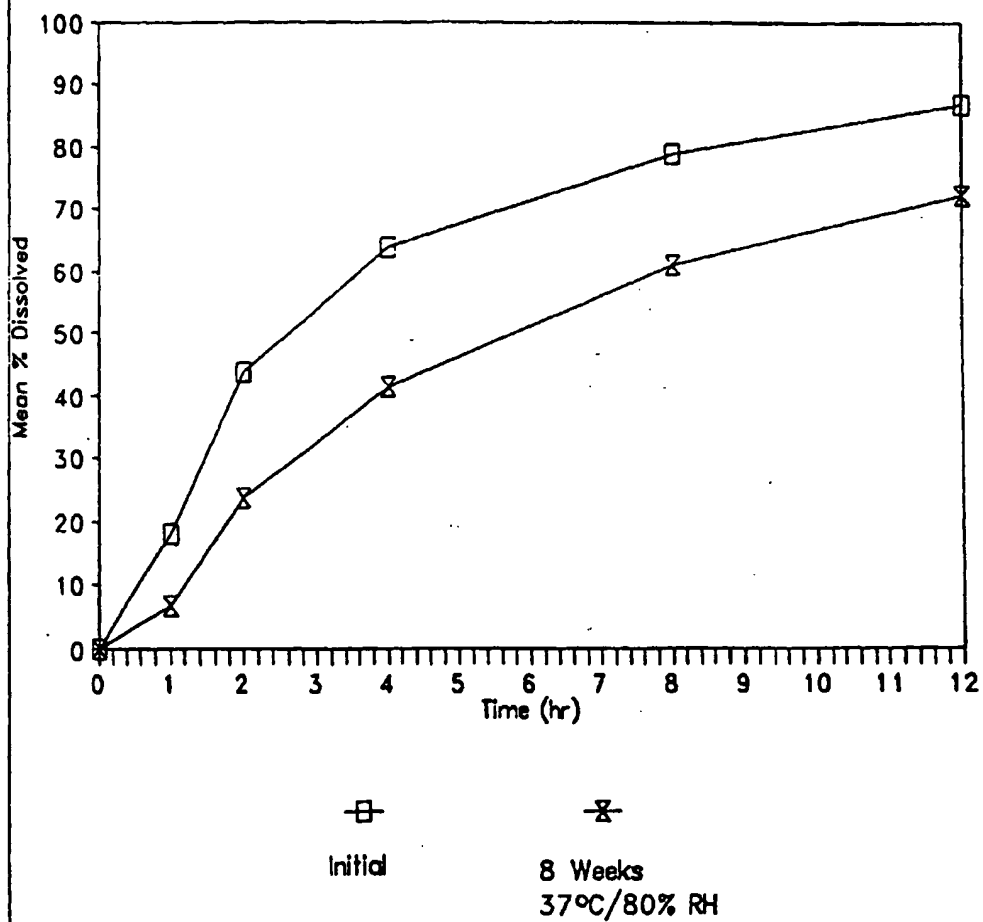
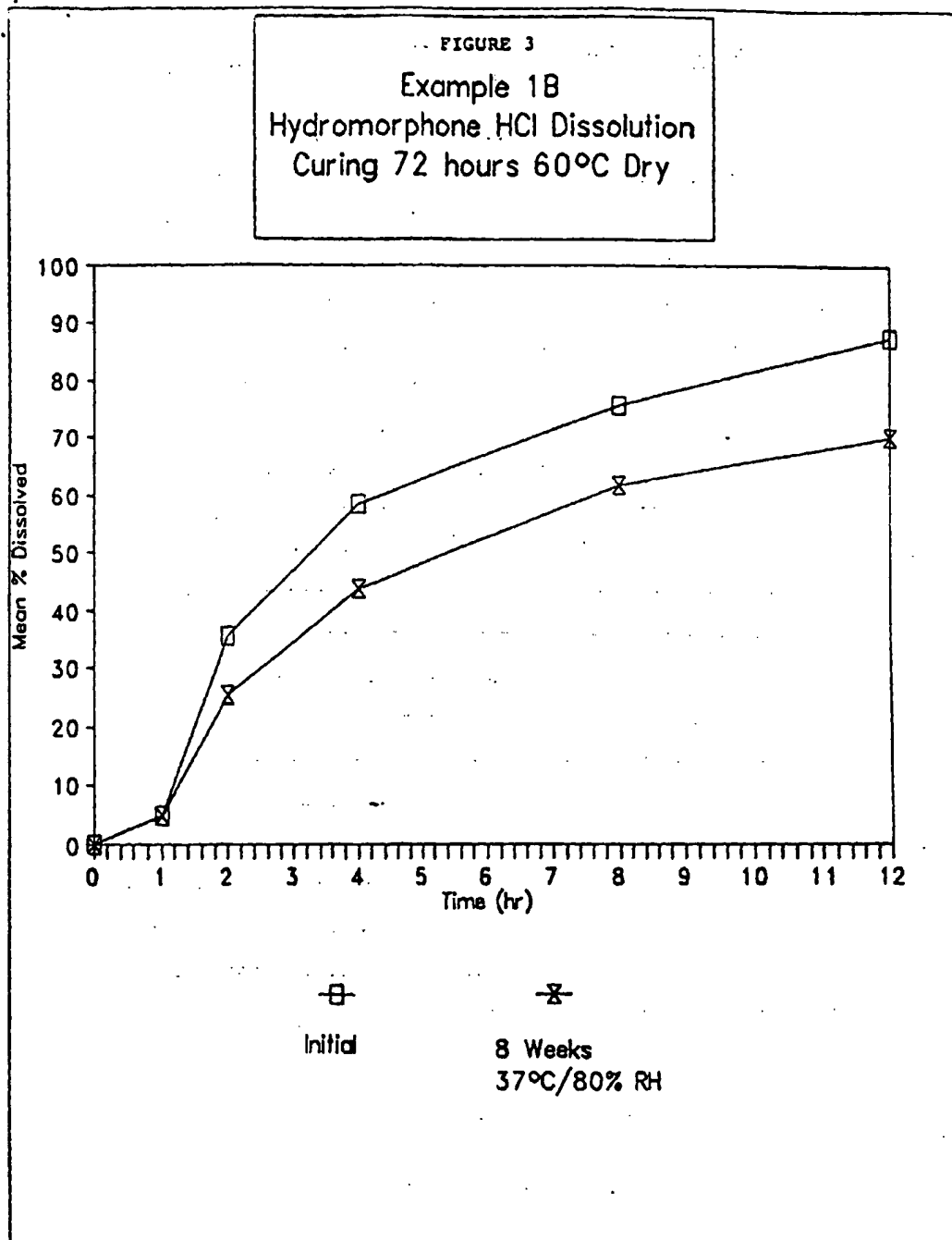


FIGURE 2
Example 1A
Hydromorphone HCl Dissolution
Curing 24 hours 60°C Dry





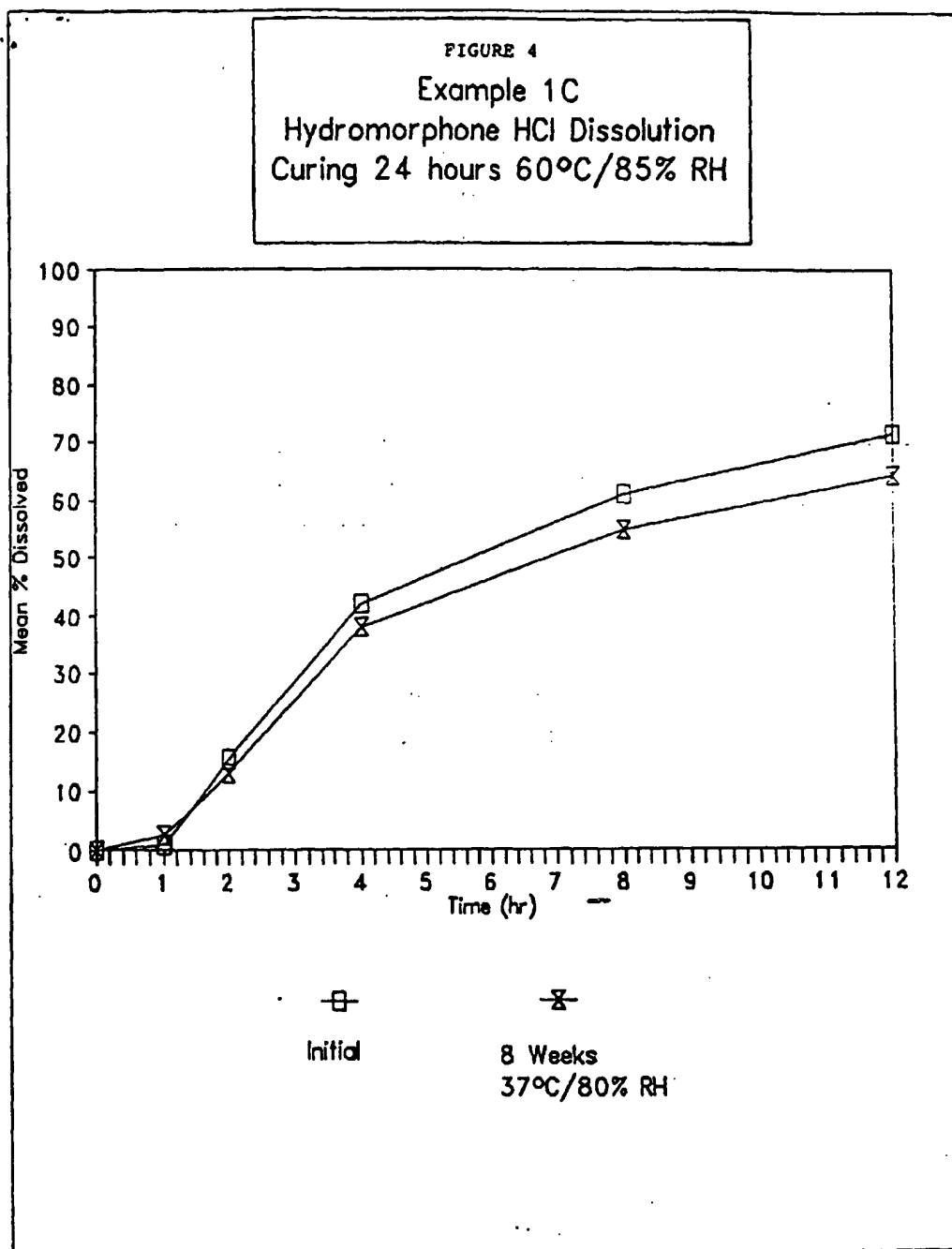
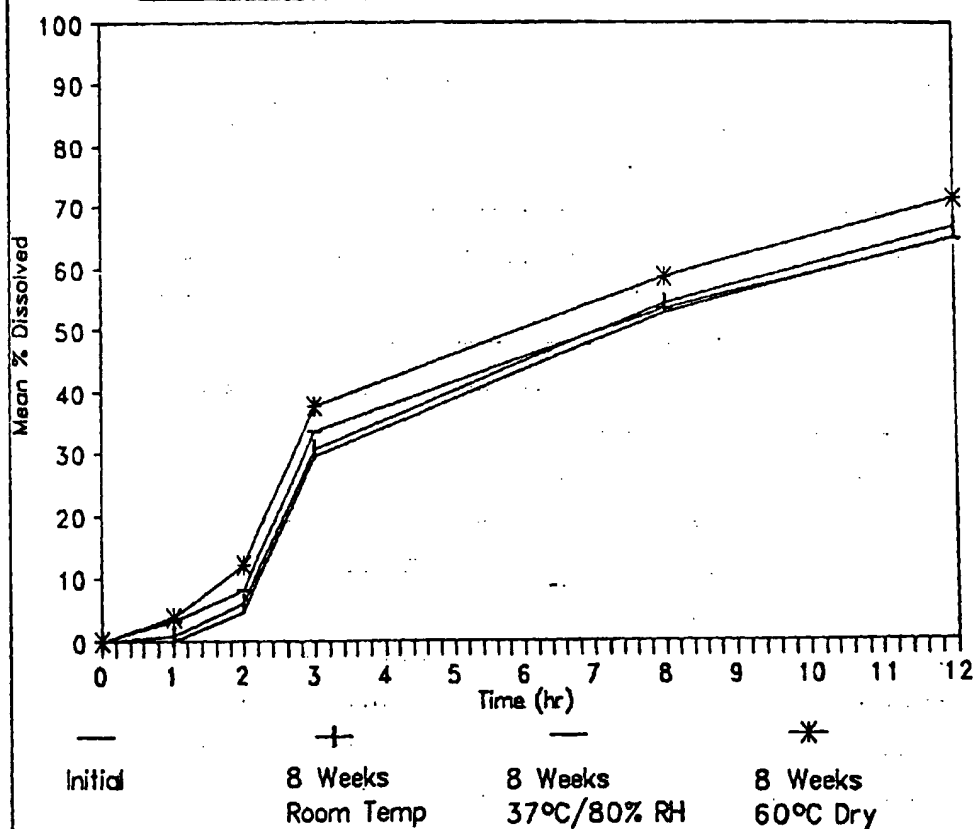
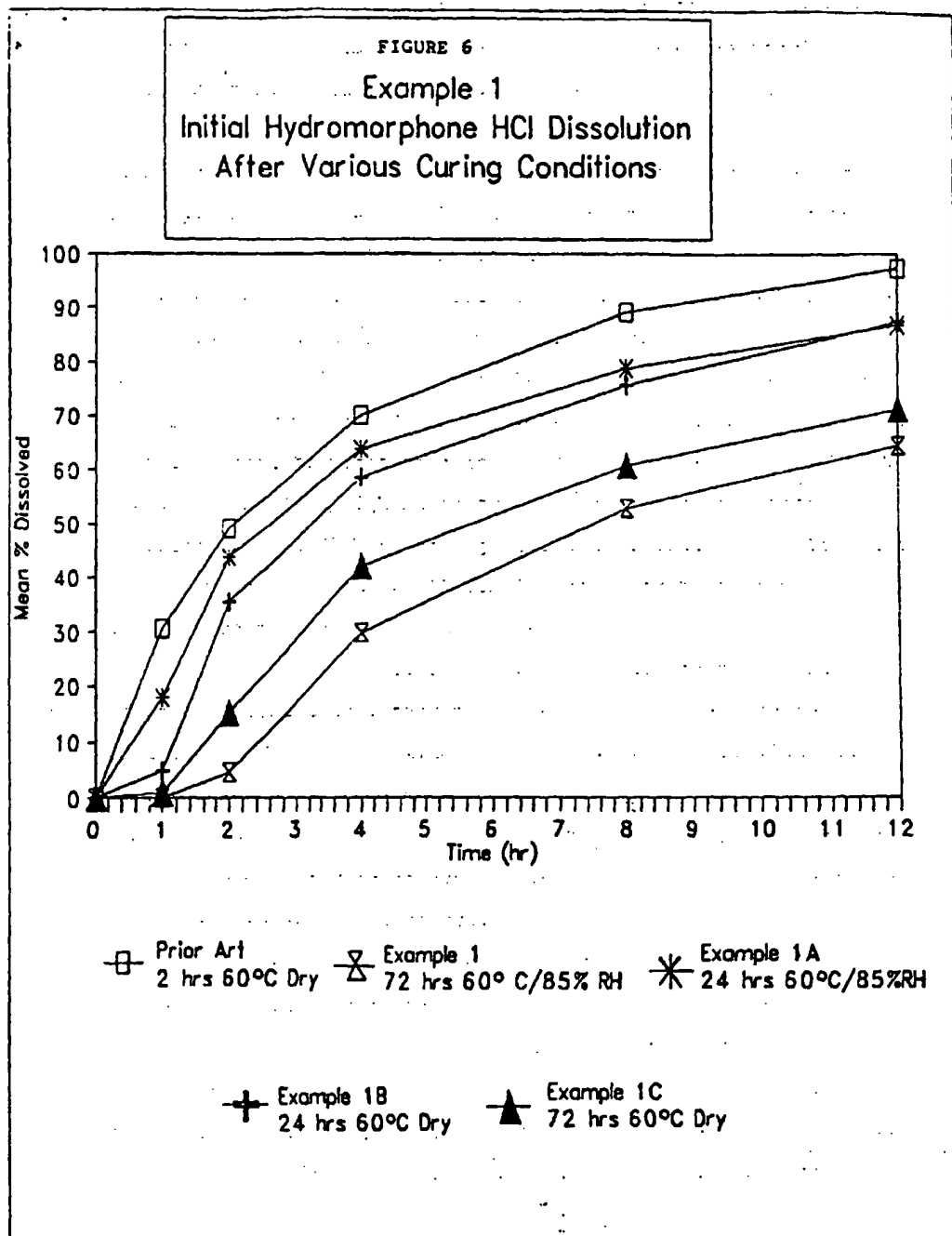


FIGURE 5

Example 1
Hydromorphone HCl Dissolution
After 8 Weeks Storage at Different Conditions





(12) INTERNATIONAL APPLICATION PUBLISHED UNDER THE PATENT COOPERATION TREATY (PCT)

(19) World Intellectual Property Organization
International Bureau



(43) International Publication Date
10 May 2001 (10.05.2001)

PCT

(10) International Publication Number
WO 01/32161 A3

(51) International Patent Classification⁷: A61K 31/00,
31/40, 31/4418, 31/366, 31/404, 31/22, A61P 25/00, 25/28

(21) International Application Number: PCT/US00/41841

(22) International Filing Date:
3 November 2000 (03.11.2000)

(25) Filing Language: English

(26) Publication Language: English

(30) Priority Data:
60/163,608 4 November 1999 (04.11.1999) US
60/219,435 20 July 2000 (20.07.2000) US
60/223,987 9 August 2000 (09.08.2000) US

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(81) Designated States (*national*): AE, AG, AL, AM, AT, AU,
AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ,
DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR,
HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR,
LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ,
NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM,
TR, TT, TZ, UA, UG, UZ, VN, YU, ZA, ZW.

(84) Designated States (*regional*): ARIPO patent (GH, GM,
KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW). Eurasian
patent (AM, AZ, BY, KG, KZ, MD, RU, TJ, TM). European
patent (AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE,
IT, LU, MC, NL, PT, SE, TR). OAPI patent (BF, BJ, CF,
CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG).

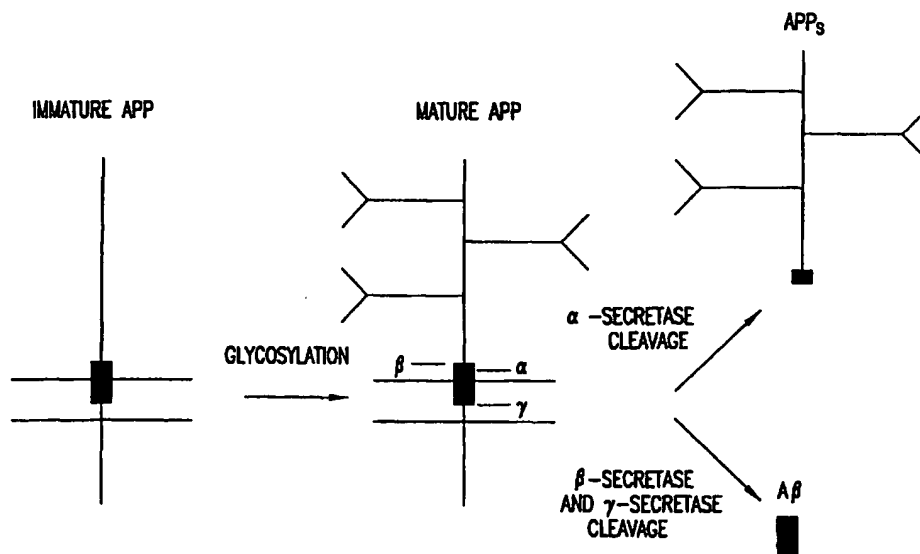
Published:

— with international search report

(88) Date of publication of the international search report:
14 March 2002

[Continued on next page]

(54) Title: USE OF A HMG-COA REDUCTASE INHIBITOR FOR TREATING AMYLOID BETA PRECURSOR DISORDERS



(57) Abstract: Methods for the treatment and prevention of APP processing disorders such as Alzheimer's disease and Down's Syndrome which are based on the administration of an effective amount of a HMG-CoA reductase inhibitor to a mammal are disclosed. Additionally, methods for the treatment and prevention of APP processing disorders such as Alzheimer's disease and Down's Syndrome which are based on the reduction of cellular cholesterol in a mammal are disclosed. These methods reduce the amount of Aβ peptides or decrease the formation of Aβ peptides or increase the clearance of Aβ peptides in a mammal suffering from Alzheimer's disease and Down's Syndrome.

WO 01/32161 A3



For two-letter codes and other abbreviations, refer to the "Guidance Notes on Codes and Abbreviations" appearing at the beginning of each regular issue of the PCT Gazette.

INTERNATIONAL SEARCH REPORT

International Application No
PCT/US 00/41841

A. CLASSIFICATION OF SUBJECT MATTER IPC 7 A61K31/00 A61K31/40 A61K31/4418 A61K31/366 A61K31/404 A61K31/22 A61P25/00 A61P25/28		
According to International Patent Classification (IPC) or to both national classification and IPC		
B. FIELDS SEARCHED Minimum documentation searched (classification system followed by classification symbols) IPC 7 A61K A61P		
Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched		
Electronic data base consulted during the international search (name of data base and, where practical, search terms used) CHEM ABS Data, MEDLINE, EPO-Internal, WPI Data, EMBASE, BIOSIS		
C. DOCUMENTS CONSIDERED TO BE RELEVANT		
Category *	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
P,X	WO 00 28981 A (NYMOX CORP ;WOLOZIN BENJAMIN (CA)) 25 May 2000 (2000-05-25) whole document, in particular page 13, last paragraph ---	1-28,33
P,X	WO 00 53173 A (TILLYER RICHARD D ;REIDER PAUL J (US); VEGA JOSE M (US); XU FENG ()) 14 September 2000 (2000-09-14) abstract page 11, line 5 - line 18 page 12, line 3 -page 13, line 31 page 17, line 22 - line 28 page 19, line 3 - line 6; claims 1,5,8,11,14-19,21-26 --- -/--	1-28,33
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Date of the actual completion of the international search 18 October 2001		Date of mailing of the international search report 29/10/2001
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INTERNATIONAL SEARCH REPORT

International Application No

PCT/US 00/41841

C.(Continuation) DOCUMENTS CONSIDERED TO BE RELEVANT		
Category	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
P,X	WO 00 31548 A (BALES KELLY RENEE ;SCIOS INC (US); CORDELL BARBARA (US); LILLY CO) 2 June 2000 (2000-06-02) abstract page 4, line 29 -page 6, line 10 page 9, line 18 -page 10, line 19 page 13, line 5 - line 18; claims 4-6,9,10 ---	25-28,33
X	WO 95 06470 A (MERCK & CO INC ;SCOLNICK EDWARD M (US)) 9 March 1995 (1995-03-09) the whole document ---	1-28,33
X	WO 99 48488 A (CHILDRENS MEDICAL CENTER) 30 September 1999 (1999-09-30) the whole document ---	25-33
Y		1-24
X	WO 98 47518 A (EUROP LAB MOLEKULARBIOLOG ;SIMONS KAI (DE)) 29 October 1998 (1998-10-29) whole document, in particular page 2, line 29 to page 3, line 13; examples ---	25-28,33
Y		1-24
X	FREARS E R ET AL: "The role of cholesterol in the biosynthesis of beta-amyloid" NEUROREPORT, RAPID COMMUNICATIONS OF OXFORD, OXFORD, GB, vol. 10, no. 8, 3 June 1999 (1999-06-03), pages 1699-1705, XP002117061 ISSN: 0959-4965 the whole document ---	25-28,33
Y		1-24
Y	WO 99 30692 A (ANDRX PHARMACEUTICALS INC) 24 June 1999 (1999-06-24) cited in the application the whole document ---	1-24
X	WO 99 38498 A (WARNER LAMBERT CO ;BISGAIER CHARLES LARRY (US); EMMERLING MARK RIC) 5 August 1999 (1999-08-05) abstract page 8, line 3 - line 20; claims 6-9 -----	25-28,33

FURTHER INFORMATION CONTINUED FROM PCT/ISA/ 210

Continuation of Box I.2

Present claims 1-4,7-18,20,21,23,25,26,29,30,33 relate to a compound defined by reference to a desirable characteristic or property, namely "HMG-CoA reductase inhibitor".

The claims cover all compounds having this characteristic or property, whereas the application provides support within the meaning of Article 6 PCT and disclosure within the meaning of Article 5 PCT for only a very limited number of such compounds. In the present case, the claims so lack support, and the application so lacks disclosure, that a meaningful search over the whole of the claimed scope is impossible. Independent of the above reasoning, the claims also lack clarity (Article 6 PCT). An attempt is made to define the compound by reference to its pharmacological profile. Again, this lack of clarity in the present case is such as to render a meaningful search over the whole of the claimed scope impossible.

Moreover, the term "active metabolite forms thereof" used in claims 5,19,22,24,27 and 31 is vague and indefinite and as such renders the scope of the claims unclear. The same applies to claim 33 which relates to the treatment of an APP disorder with any means able to lower cellular cholesterol levels.

Furthermore, present claims 1,3-24,33 relate to the treatment of a disease which actually is not well defined. The use of the definition "APP processing disorder" in the present context is considered to lead to a lack of clarity within the meaning of Article 6 PCT. It is not fully possible to determine the diseases for which protection might legitimately be sought. The lack of clarity is such as to render a meaningful complete search impossible.

Consequently, the search has been carried out for those parts of the claims which appear to be clear, supported and disclosed, namely those parts relating to the compounds structurally identified in claims 5-6, and to the defined, real diseases mentioned in claim 2.

Claims searched incompletely: 1-33

The applicant's attention is drawn to the fact that claims, or parts of claims, relating to inventions in respect of which no international search report has been established need not be the subject of an international preliminary examination (Rule 66.1(e) PCT). The applicant is advised that the EPO policy when acting as an International Preliminary Examining Authority is normally not to carry out a preliminary examination on matter which has not been searched. This is the case irrespective of whether or not the claims are amended following receipt of the search report or during any Chapter II procedure.

INTERNATIONAL SEARCH REPORT

Information on patent family members

International Application No

PCT/US 00/41841

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